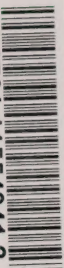



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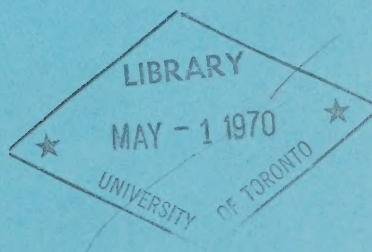
of the Minister of National Health and Welfare

Under the

Hospital Insurance

and

Diagnostic Services Act



for the Fiscal Year Ended March 31, 1959

ANNUAL REPORT OF THE MINISTER OF NATIONAL HEALTH AND WELFARE

INDEX

PAGE

THE HOSPITAL INSURANCE AND DIAGNOSTIC SERVICES ACT AND THE HOSPITAL INSURANCE REGULATIONS	1
ANNUAL REPORT OF THE	
MINISTER OF NATIONAL HEALTH AND WELFARE	
ON THE OPERATION OF	
AGREEMENTS WITH THE PROVINCES	
UNDER THE	
HOSPITAL INSURANCE AND DIAGNOSTIC SERVICES ACT	
FOR THE FISCAL YEAR ENDED	
MARCH 31, 1959.	

1. Executive Response	18
2. Interdepartmental Cooperation	19
2. Intergovernmental Cooperation	22
4. Financial Procedures	15
3. Reporting Procedures	28
(i) Financial Reporting Forms	12
(ii) Annual Report of Hospitals	12
6. Consultant Services	14
7. Technical Assistance	14

FEDERAL-PROVINCIAL CO-OPERATION	11
1. Technical Conferences	12
2. Advisory Committee on Hospital Insurance and Diagnostic Services	18
3. Sub-Committees and Working Parties	14

1958/59 - 1967/68

ANNUAL REPORT
OF THE
MINISTER OF NATIONAL HEALTH AND WELFARE

INDEX

	<u>PAGE</u>
I THE HOSPITAL INSURANCE AND DIAGNOSTIC SERVICES ACT AND THE HOSPITAL INSURANCE REGULATIONS	2
1. Benefits	3
2. Participating Hospitals	4
3. Coverage	5
4. Period of Entitlement	6
5. Federal Contributions	6
6. Shareable Costs	7
7. Financing	
(i) Federal Share of Costs	9
(ii) Provincial Share of Costs	9
8. Agreements	9
II FEDERAL ADMINISTRATION	10
1. Executive Responsibility	10
2. Interdepartmental Co-operation	10
3. Intergovernmental Co-operation	11
4. Financial Procedures	11
5. Reporting Procedures	12
(i) Financial Reporting Forms	12
(ii) Annual Report of Hospitals	12
6. Consultant Services	13
7. Technical Assistance	13
III FEDERAL-PROVINCIAL CO-OPERATION	13
1. Technical Conferences	13
2. Advisory Committee on Hospital Insurance and Diagnostic Services	14
3. Sub-Committees and Working Parties	14

PAGE

IV	PROVINCIAL PROGRAMS	15
	1. Dates of Agreements and Commencement of Programs	15
	2. Provincial Administration	16
	3. Benefits	17
	(i) In-Patient Services	17
	(ii) Out-Patient Services	17
	4. Methods of Provincial Financing	18
	(i) Charges not Related to Specific Services	18
	(ii) Authorized Charges	20
	5. Recipients of Public Assistance	20
	6. Waiting Periods for Benefits	21
	7. Insurance Entitlement Outside of the Province	21
	(i) Out-of-Province Benefits	21
	(ii) Benefits on Change of Residence	24
	8. Methods of Fixing Rates and Making Payments to Hospitals	24
	9. Technical Advisory Services	25
V	THE NUMBER OF PERSONS COVERED	25
VI	PAYMENTS TO THE PROVINCES	30
	1. Formula for Advances	30
	2. Per Capita Cost of In-Patient Services in Canada	30
	3. Advance payments to Participating Provinces	31
VII	CONCLUSION	36

ANNUAL REPORT
of the
MINISTER OF NATIONAL HEALTH AND WELFARE
on the operation of
Agreements with the Provinces
under the
Hospital Insurance and Diagnostic Services Act
for the fiscal year ended March 31, 1959.

In accordance with the provisions of Section 9 of the Hospital Insurance and Diagnostic Services Act, the Minister of National Health and Welfare is required to report to Parliament as soon as possible after the end of each fiscal year, on the operation of the Agreements with the provinces entered into in accordance with the terms of the federal legislation. It should be explained at the outset that while federal payments to the provinces are made on the basis of a fiscal year, hospital records in Canada, including both financial and statistical records, are maintained on the basis of a calendar year. The amounts of the federal contributions to the provinces, while paid out of monies voted by Parliament for a given fiscal year, are determined on the basis of payments made to hospitals during a calendar year. For this reason, the Annual Report to Parliament will inevitably consist of a report of final contributions for a calendar year ending December 31 and of advance payments made to the provinces for the fiscal year ending the following March 31. All statistical material and data relating to the costs of operating hospitals will be presented on the basis of a calendar year.

This Report contains information concerning the advance payments made to the provinces for the fiscal year ended March 31st, 1959. However, since this is the first Report to Parliament under the Act, and in order to provide a comprehensive description of all provincial hospital insurance programs, together with information pertaining to federal-provincial co-operation, the descriptive material contained in this Report covers developments as they have taken place from the inception of the program until the end of the calendar year 1959.

The Hospital Insurance and Diagnostic Services Act was passed by Parliament in April 1957, and was proclaimed as coming into force on May 1, 1957. As a result of an amendment to the Act, to which reference is made below, five provinces commenced to operate programs on July 1, 1958, in accordance with agreements which had been entered

into a short time before. These provinces were British Columbia, Alberta, Saskatchewan, Manitoba and Newfoundland. On January 1, 1959, two additional provinces, Ontario and Nova Scotia, commenced to operate programs pursuant to agreements made with these provinces. Thus, by the end of the fiscal year ending on March 31, 1959, seven provinces were providing insured services in accordance with agreements under the Hospital Insurance and Diagnostic Services Act.

I. THE HOSPITAL INSURANCE AND DIAGNOSTIC SERVICES ACT
AND THE HOSPITAL INSURANCE REGULATIONS

The Hospital Insurance and Diagnostic Services Act passed by Parliament, received royal assent on April 12, 1957. The Hospital Insurance Regulations were made by the Governor in Council on February 25, 1958. Amendments were made on June 27, 1958. The Act to Amend the Hospital Insurance and Diagnostic Services Act, passed by Parliament, received royal assent on June 26, 1958. The primary purpose of the Amendment was to eliminate the condition embodied in the original Act to the effect that no contribution would be paid by Canada until at least six provinces, containing at least one-half the population of Canada, had entered into an Agreement and the provincial law in relation to those provinces was in force.

Although six provinces had entered into agreements with the federal government prior to July 1, 1958, one of these provinces, containing a substantial part of the population of Canada, was not able to complete the necessary preparations in order to commence the operation of its program on that date. Thus, without the amendment which was made to the Act, the other five provinces would have been deprived of federal contributions for at least an additional six months or until the sixth province was in a position to initiate its program. In order to make possible the payment of contributions by Canada to the five provinces which were at that time prepared to proceed, the conditional clause in the Hospital Insurance and Diagnostic Services Act was repealed and the relevant section was replaced by one which permitted the commencement of payments by Canada from the first day of July 1958.

The other two amendments for which provision was made in the Amending Act of June 1958, related to certain services which will be discussed below under the relevant item.

1. Benefits

In order to participate in the hospital insurance and diagnostic services program, the province is required to provide a range of in-patient services which is set out in the Act as follows:

- (i) accommodation and meals at the standard or public ward level,
- (ii) necessary nursing service,
- (iii) laboratory, radiological and other diagnostic procedures together with the necessary interpretations for the purpose of maintaining health, preventing disease and assisting in the diagnosis and treatment of any injury, illness or disability.
- (iv) drugs, biologicals and related preparations as provided in an agreement when administered in the hospital,
- (v) use of operating room, case room and anaesthetic facilities, including necessary equipment and supplies,
- (vi) routine surgical supplies,
- (vii) use of radiotherapy facilities where available,
- (viii) use of physiotherapy facilities where available,
- (ix) services rendered by persons who receive remuneration therefor from the hospital, and
- (x) such other services as are specified in an agreement;

In essence, the in-patient services which are made available in all the provinces participating in the program, are the same except with regard to such items as drugs, where the details are provided in the Agreement with the province. In most cases, however, the drugs which are provided are those which, in the judgement of the physician, are required by a patient while in hospital in accordance with accepted practice and sound teaching. Proprietary or patent drugs are generally excluded.

Insured persons are entitled to coverage for standard or public ward accommodation only. Insofar as private or semi-private accommodation is concerned, insured persons are themselves responsible for that part of the charge which exceeds the standard rate, unless the preferred accommodation has been made available for medical reasons. Similarly, necessary nursing services do not include private nursing in the usual sense, although special nursing may be included when it is associated with medical need.

The provision of out-patient services is optional, the provinces having the freedom to choose any or all of the out-patient services as they deem fit. They are also free to exclude out-patient services entirely if they so choose. The list of out-patient services in the federal Act is identical with the in-patient services to which reference is made above. Initially, the Act excluded accommodation and meals and drugs, but the relevant sections of the Act were revised in June, 1958, so as to delete these exclusions.

2. Participating Hospitals

The benefits provided under the Act are made available in the hospitals listed in an Agreement between the provincial and federal governments. These include acute general, chronic and convalescent hospitals. The Act specifically excludes tuberculosis hospitals, hospitals for the mentally ill and institutions the primary purpose of which is the provision of custodial care. It should be noted that in-patient services provided in listed hospitals, regardless of individual diagnosis, are insured services. Thus, the services provided in the psychiatric ward of a general hospital, for example, are insured services despite the fact that institutions for the mentally ill as such, are excluded from the Act. In order to qualify for listing in the Agreement, a hospital must be in a position to provide all of the in-patient services listed in the Act, and must maintain an admission policy which ensures that custodial care is excluded. Hospitals which meet the requirements of the Act, and which are supervised, licensed and inspected according to provincial law and which are put forward by the province for listing, may become participating hospitals in accordance with the legislative provisions.

For purposes of the Agreement, hospitals are designated by certain categories including 'hospitals owned or operated by Canada', which are the federal hospitals administered by the Departments of Veterans Affairs and National Defence, and hospitals operated by the Directorate of Indian and Northern Health Services of the Department of National Health and Welfare; 'contract hospitals', which are defined

in the Regulations as private or industrial hospitals with which a province has contracted for the provision of insured services; and what are described as "budget review" hospitals. The budget review hospitals comprise the bulk of the listed hospitals since these include the public hospitals in the provinces. The reason for differentiating between these categories of hospitals is that different methods are used by the provinces for reimbursing the various categories of hospitals.

For the most part, federal hospitals and contract hospitals are reimbursed at agreed rates either related directly to costs or in conformity with rates payable to other provincial hospitals having regard to size, facilities, standards of service and location. The budget review hospitals are reimbursed on the basis of operating costs and in accordance with the methods described in Part III below.

One of the undertakings of the province contained in the Agreement with the federal government, relates to the maintenance of adequate standards in the hospitals. All listed hospitals must be subject to arrangements made by the province to ensure that adequate standards are maintained including the supervision, licensing and inspection of the hospitals. Considerable emphasis has been placed on the quality of the care made available through the hospital insurance programs.

3. Coverage

The federal Act prescribes that the province must make insured services available to all residents of the province on equal terms and conditions. In effect, therefore, there may be no exclusions on grounds of age, income or pre-existing conditions. Residents of the province are defined in the Regulations as persons legally entitled to remain in Canada, who make their home and are ordinarily present in the province; tourists, transients or visitors to the province are specifically excluded.

Although the federal Act states that no specified period of residence may be required as a condition precedent to the establishment of residence in the province, waiting periods for benefits not exceeding three months are permitted. The inclusion of waiting periods for benefits resulted from the request of some provinces to be permitted to impose a short period prior to entitlement, for reasons of provincial administration. Not all of the provinces felt impelled to impose such a waiting period. Consequently, a varied pattern of waiting periods emerged. To ensure coverage for insured persons who were residents of one participating province and who move their place of residence to another participating province in which a waiting period for benefits is applied,

the Regulations entitle such a person to be deemed to continue to be a resident of the original province during the waiting period. As a result of discussions between the provinces, the laws of all provinces now ensure continuing coverage on change of residence between participating provinces.

Certain residents of the province who have entitlement to the same type of services as provided under the hospital insurance program, are not covered by the provincial program. These include members of the armed forces and of the Royal Canadian Mounted Police. In addition, where residents of the province are entitled to similar services under statutes such as Workmens Compensation, their entitlement under such laws excludes them from entitlement for the same services under the hospital insurance program.

Certain categories of residents of the provinces such as reserve Indians and recipients of War Veterans Allowances, for whom the federal government had been providing hospital coverage, are deemed to be residents of the province entitled to the same benefits as other residents. However, in order to continue to bear the responsibilities which had been assumed by the federal government over a period of years, the federal government accepts certain responsibilities for the payment of premiums or co-insurance in respect of these persons, where such levies are made under the provincial law. This arrangement parallels the arrangements made in the provinces and described below in connection with recipients of public assistance.

4. Period of Entitlement

Insured persons are entitled to receive insured services for as long a period as is medically necessary. No arbitrary limitations may be imposed in connection with length of stay in the hospital other than those imposed by medical necessity. However, where an insured person remains in the hospital beyond the period considered to be medically necessary, he is no longer entitled to insurance coverage. Medical necessity is determined solely by professional medical personnel, be it at the hospital level or at the provincial level.

5. Federal Contributions

The amount of the federal contributions to the provinces is calculated on the basis of a formula contained in the Act. It has been designed in such a way as to provide greater federal assistance to those provinces in which the per capita cost of hospital care is lower. The formula is also designed to provide for an equitable federal contribution to the provinces, having regard to the considerable variation in the per capita costs between the provinces.

The federal contribution as outlined in the Act, is the aggregate in the year of twenty-five per cent of the per capita cost of in-patient services in Canada, that is the national per capita cost, and twenty-five per cent of the per capita cost of in-patient services in the province less the amount of authorized charges, multiplied by the average for the year of the number of insured persons in the province.

The effect of this formula is that the high-cost provinces receive a lower percentage of their costs from the federal government than do the low-cost provinces. The inclusion in the formula of the national per capita, however, acts as a deterrent to the high-cost provinces, since the more that provincial costs exceed the national costs, the lower the percentage of the federal contribution will be.

Generally speaking, the federal contribution amounts to approximately half of the provincial costs across the country, although in individual provinces it may vary as much as seven or eight per cent above or below half the costs.

Since the federal contribution is calculated on an annual basis, provision was made in the legislation for advances on account of contributions, so that the provinces would not be required to wait a full year for reimbursement of the amounts which they are required to pay to hospitals on a continuing basis. In order to expedite the payment of advances and, at the same time, to forestall the likelihood of major financial adjustments after the end of the year, the formula which is used for the calculation of the advance, provides for a small hold-back of the amount due to the province. The formula for the advance, therefore, follows the formula for the annual contribution except that twenty-two per cent of the per capita cost of in-patient services in Canada is paid, instead of twenty-five per cent provided for in the annual calculation.

6. Shareable Costs

The costs which are shareable by the federal government, are described in the federal legislation. The Act specifically excludes from shareable costs amounts expended on the capital cost of land, buildings of physical plant; for the payment of any capital debt or interest related to capital debt; for the payment of debt incurred prior to the coming into force of the Agreement or for the interest related to such prior debt; or any provision for depreciation on the value of land, buildings or physical plant. The term physical plant is defined in the Regulations as excluding furniture and movable equipment or non-movable equipment specially required for use in a hospital. Thus, these items are shareable.

In this connection, it should be noted that most of the capital items which are excluded from the definition of shareable costs, such as the costs of construction, renovation and other matters pertaining to physical plant, are supported by the federal government through the National Health Grants program and particularly through the Hospital Construction Grant. The terms of the Hospital Construction Grant were broadened very considerably prior to the inauguration of the Hospital Insurance and Diagnostic Services program so that the amounts made available were substantially increased and the items for which these funds were made available were expanded.

Generally speaking, shareable costs are the operating costs of the hospital which have been approved by the provincial authority and which have been determined in accordance with recognized and generally accepted accounting principles and procedures. The operating costs of a hospital as defined in the Regulations, however, specifically excludes a number of items which, although provided in or in connection with the hospital, are not considered to be an integral part of the operation of the hospital. These include such items as ambulance services and the direct costs related to research. Where a research project is carried out in a hospital, the gross salaries, wages and expenses which have been incurred for medical, surgical and other supplies, and for drugs and equipment, are excluded from the calculation of shareable costs. Such research projects, however, are eligible for financial support under the National Health Grants program. The indirect costs of such research, are not deducted from the operating costs of the hospital for purposes of calculating the shareable amount.

The costs of research which is carried out in a hospital as an integral part of hospital care, are considered to be normal operating costs and are therefore shareable.

As mentioned earlier, insured in-patient services are for accommodation at the standard or public ward level. Direct charges may be made, therefore, to insured persons for accommodation over and above that of the standard ward level. For purposes of sharing, half of the income derived by the hospital from such preferred accommodation is shared by the federal government since a portion of the costs is inseparable from the over-all operating costs. For example, the costs of heating, lighting and cleaning cannot be separated from the total costs of such services in the hospital.

Before arriving at the shareable operating costs, there are a number of other deductions made, including the deductions of income derived from persons not entitled to insured services by reason of coverage under other legislation; income from uninsured non-residents;

income from gift shops, farms and other ancillary operations of the hospital; cash recoveries for meals, laundry, accommodation and other services provided to persons other than patients; and gross earnings not related to the provision of in-patient services in the hospital.

The province is required to approve of the costs of each hospital and these approved costs form the basis of the federal sharing formula

7. Financing

(i) Federal Share of Costs

The federal share of costs is paid from the Consolidated Revenue Fund. By making the federal contributions to the provinces in this manner, it was not necessary to seek an amendment to the British North America Act as would have been required if any direct federal levy had been imposed.

(ii) Provincial Share of Costs

As noted above, the provinces were free to devise their own methods for financing the provincial share of costs. In the main, these methods consist of premiums, sales tax, property tax, general revenue or a combination of these. The details of the provincial methods are described below.

8. Agreements

The federal Act empowers the Minister of National Health and Welfare to enter into Agreements with the provinces in connection with the matters for which provision is made in the legislation. These Agreements consist of a formal contract and five schedules. The matters which are required to be included in the Agreements, and which are prescribed in the Act include an undertaking by the provinces to make insured services available to all residents upon uniform terms and conditions; to make arrangements to ensure the maintenance in hospitals of adequate standards; to maintain adequate records and accounts in connection with the provision of insured services and the costs, and to permit access to these records and accounts; and to make provision for the recovery of costs in third party liability cases.

The federal government undertakes to pay the provinces the amounts for which provision is made in the Act and to make available to the provinces reports and records of the calculation of these costs.

The schedules to the Agreement include a list of participating hospitals; a list of the in-patient and out-patient services provided under provincial law; a list of the legislative enactments pursuant to which persons are entitled to hospital and diagnostic services; and a list of drugs, biologicals and related preparations provided under provincial law. A particularly important schedule, the details of which are listed in the Regulations, is that in which the Scheme for Administration of the provincial law is described. This schedule contains a broad outline of the methods through which the province carries out its undertakings in accordance with the Agreement.

II. FEDERAL ADMINISTRATION

1. Executive Responsibility

The administration of the Hospital Insurance and Diagnostic Services program at the federal level is the responsibility of the Directorate of Health Services of the Department of National Health and Welfare and is carried out by the Health Insurance section. This section is headed by a Principal Medical Officer and is staffed by a medical officer who is Assistant to the Principal Medical Officer, Consultants in Hospital Accounting and in Hospital Administration, and an Administrative Officer.

2. Interdepartmental Co-operation

In order to facilitate efficient administration, utilizing only this small staff, a number of specially qualified officers in other divisions of the Department and other departments of the federal government, work in close collaboration with Health Insurance on what might best be described as a 'team' basis. In the main, the team consists of officers of the Research and Statistics Division and the Legal Division of the Department; officers of the Pensions and Social Insurance Section of Treasury Board, Department of Finance; and representatives of the Comptroller of the Treasury. Insofar as certain special aspects of the program are concerned, close working relationships have been established with additional federal departments. For example, in the field of hospital statistics, Health Insurance works closely with the Dominion Bureau of Statistics and the Research and Statistics Division of the Department of National Health and Welfare. Needless to say, problems relating to veterans are dealt with in collaboration with the Department of Veterans Affairs. Problems relating to the Indian population necessitate collaboration with the Directorate of Indian and Northern Health Services and with the Department of Citizenship and

Immigration. Where matters pertaining to the Northwest Territories and the Yukon are concerned, collaboration with the Department of Northern Affairs and National Resources is maintained. The Department of National Defence also has an interest in certain areas of the program and, when these are concerned, liaison is maintained with that Department. Problems relating to immigrants and sick mariners bring the Quarantine, Immigration Medical and Sick Mariners Services of the Department into the picture.

3. Intergovernmental Co-operation

During the initial planning and development of provincial programs, regular consultations were held on a continuing basis between the province concerned and the federal 'team'. The formulation of the final texts of the Agreements was worked out on this joint basis and the provincial laws were discussed with the provincial authorities in the draft stage so as to ensure that there would be no conflict with the requirements of the federal legislation.

Following the inception of the provincial programs, members of the 'team' continued to be available to the provinces and, on their requests, frequently visited the provinces to discuss on the spot the details concerning the administration of provincial programs.

4. Financial Procedures

Administrative procedures were set up at the federal level to ensure the expeditious payment of advances on the federal contribution to the provinces on a monthly basis with a view to eliminating undue delay but, at the same time, ensuring that the amount of the advances was maintained at levels prescribed by the Hospital Insurance Regulations. A simple procedure was set up whereby, each month, the province submits a monthly statement of payments, signed by the provincial authority and the provincial auditor and certified by the federal Treasury auditor in the province. The Health Insurance section is responsible for calculating the amount of the advance to which the province is entitled; forwards the statement duly certified by the Minister to the Comptroller of the Treasury who, in turn, forwards the payment for the monthly advance to the province. These payments have been going forward to the provinces with a minimum of delay.

Since the amount of the advance is calculated on a formula described in Part I above, which includes the per capita cost of hospital care in Canada, continuing studies are carried out to ensure that this figure

maintains continuing accuracy in an area where costs are subject to fluctuations. Changes in the national per capita cost are made, subject to the approval of Treasury Board, at varying intervals as the situation requires. In accordance with the requirements of the Act and the undertakings in the Agreements, the provinces are informed of the basis for any change. The purpose of making periodic adjustments in the national per capita is to maintain realistic advance payments and to eliminate major adjustments in the calculation of the annual federal contribution following the end of the year.

5. Reporting Procedures.

(i) Financial Reporting Forms

The procedure which has been established for the reporting by the provinces of financial data, has been simplified as much as possible so as to avoid the imposition of undue administrative responsibilities on the provinces but, at the same time, to adhere minutely to the requirements of the federal law. To achieve this purpose, a series of forms was devised in consultation with the provinces, providing such data as monthly statement of payments; interim statement of costs; final statement of costs for the province as a whole and for individual participating hospitals; and a summary of the data including any necessary reconciliation of total costs with payments by the provincial authority. The data obtained through these forms, provide the basis for the monthly advance payments; interim readjustments; and final calculation of the amount of the contribution to which the province is entitled after the end of the year. These data are also used in adjusting the national per capita figure discussed above.

(ii) Annual Report of Hospitals

Data of a financial and statistical nature, are also provided in the Annual Return of Hospitals which forms one part of the individual hospitals' yearly report to the federal government. For some years, hospitals in Canada have been making annual reports to the Dominion Bureau of Statistics under the authority of the Statistics Act. This report has now been expanded in such a way as to continue to provide the Dominion Bureau of Statistics with the information required by them and, at the same time, to provide the Department of National Health and Welfare with essential statistical and financial data related to the administration of the Hospital Insurance and Diagnostic Services Act. The Dominion Bureau of Statistics and the Department have co-operated in devising this Annual Return which replaces the former D.B.S. Return and which is now submitted both to the Bureau and to Health Insurance.

6. Consultant Services

Although the Hospital Insurance and Diagnostic Services program involves the payment of substantial sums of money, it has been a basic principle of the administering authorities to ensure the provision of a quality health service. For this reason, considerable emphasis has been placed on the need for maintaining a high quality of care at the hospital level itself, and for assisting the provinces in their responsibility of fulfilling this objective. For this purpose, the broad range of advisory and consultant services maintained by the Department of National Health and Welfare, has been available to Health Insurance and, on request, to the provinces in providing consultant services in a variety of fields. The consultant services are also provided on request by the consultant staff of Health Insurance.

7. Technical Assistance

From the outset of the program, the provinces were assured that the funds which have been available for some years under the National Health Grants program would continue to be available for projects designed to train and employ personnel whose duties were geared towards the improvement of standards. These funds are not, of course, available for costs properly related to the costs of provincial administration. They are, however, available for technical purposes which will improve and enhance the quality of the provincial service.

III. FEDERAL - PROVINCIAL CO-OPERATION

1. Technical Conferences

A tradition of close co-operation between the federal and provincial governments in matters relating to the Hospital Insurance and Diagnostic Services program, was initially established prior to the commencement of the joint program. During the early stages of the program, federal-provincial technical conferences on hospital insurance were convened in Ottawa. These conferences were attended by representatives of all the provincial governments, including governments not yet participating in the joint program. Between December 1957 and April 1959, four technical conferences were held, and a number of working parties appointed by the conferences carried out a considerable amount of preparatory work particularly with regard to financial forms and statistical returns. Discussions were held at the conferences on a wide variety of topics relating to matters of mutual concern. The keen interest of the provinces in these conferences was reflected in the expanding attendance at the meetings, the last conference having been attended by over ninety persons.

While the large attendance at the technical conferences reflected the active interest of the provinces in joint consultation, it also precluded the type of discussion which may only be achieved in a body of considerably more modest dimensions. It was recognized, however, that the device for federal-provincial exchange of views was one which should be maintained to the mutual benefit of all concerned. For this reason, the Minister of National Health and Welfare, with the concurrence of his Cabinet colleagues and the agreement of the provincial Ministers, established a permanent Advisory Committee on Hospital Insurance and Diagnostic Services.

2. Advisory Committee on Hospital Insurance and Diagnostic Services

Among the terms of reference of the Advisory Committee, are the following:

"The Committee shall discharge, carry out and perform such duties, powers and responsibilities as are necessary to assist and advise the Minister of National Health and Welfare in connection with the administration of the Hospital Insurance and Diagnostic Services Act, the agreements thereunder and all other matters properly related to an effective and efficient hospital insurance program in Canada. The Advisory Committee or any Technical Sub-Committee may make special studies, examinations or investigations, consult with such persons as may be necessary and generally undertake all matters and things as will lead to the best development in Canada of the hospital insurance program."

The provinces were invited to name not more than two representatives as members of the Advisory Committee, whose chairman is the Director of Health Services and co-chairman is the Principal Medical Officer, Health Insurance. The Deputy Minister of Health is an ex-officio member while other members of the Committee are the chairmen of the Sub-committees.

3. Sub-Committees and Working Parties

As in the case of the Advisory Committee itself, the provinces were invited to name representatives to the sub-committees which include sub-committees on Quality of Care, Research and Statistics;

Residence and Uniformity of Benefits; and Finance and Accounting. In the main, the members of the Advisory Committee are the responsible executive officers of the provincial authorities while the members of the sub-committees are technical experts on the staffs of the provincial authorities.

The first meeting of the Advisory Committee on Hospital Insurance and Diagnostic Services was held early in November 1959 in Ottawa. This meeting was preceded by the first meeting of the Sub-committee on Quality of Care, Research and Statistics under the chairmanship of the Director of the Research and Statistics Division of the Department of National Health and Welfare.

As a result of these meetings, a working party of the Sub-committee has been set up with a view to studying and recommending methods for standardizing provincial data in order to facilitate the utilization of such data on a comparable basis on a national level.

The Sub-committee on Residence and Uniformity of Benefits has not met yet as a formal sub-committee of the Advisory Committee. However, this group, under the chairmanship of the Legal Advisor, Department of National Health and Welfare, had been meeting in connection with the technical conferences and had already dealt with a number of problems particularly those pertaining to the status of insured persons who change their place of residence from one participating province to another. It is in large measure due to the work of this group, that all provinces now ensure that a resident of one participating province does not suffer break in coverage due to waiting periods for benefits in another participating province, when he moves his place of residence.

The Sub-committee on Finance and Accounting has not yet met as a formal group. However, prior to the establishment of the Advisory Committee, discussions of finance and accounting problems had been held at the technical conferences.

IV. PROVINCIAL PROGRAMS

1. Dates of Agreements and Commencement of Programs

The first Agreement between a province and the federal government, was the Agreement signed with the province of Ontario on March 3, 1958. At that time, however, Ontario was still in an initial planning stage and did not anticipate the commencement of the hospital insurance and diagnostic services program in the province until January 1, 1959. On that date, Ontario commenced to operate its program.

The second Agreement was signed with Newfoundland on June 9, 1958, followed by the Agreements with the provinces of British Columbia on June 25, and Alberta and Manitoba on June 27, 1958. The Agreement with Saskatchewan was signed on June 30, 1958. These five provinces commenced to operate Hospital Insurance and Diagnostic Services programs on July 1, 1958, pursuant to the amendment to the Act passed by Parliament during the previous month.

On October 16, 1958, an Agreement was signed with Nova Scotia and the program in that province commenced to operate on January 1, 1959.

New Brunswick signed an Agreement with the federal government on June 27, 1959, and commenced to operate the Hospital Insurance and Diagnostic Services program in that province on July 1, 1959. Shortly thereafter, on July 20, 1959, an Agreement was signed with Prince Edward Island and the provincial program in that province commenced to operate on October 1, 1959.

2. Provincial Administration

The provincial authorities responsible for the administration of the provincial programs, vary from province to province. In some provinces, the program is administered by the Department of Health, as a direct responsibility of the Deputy Minister of Health. This pattern has been adopted in the provinces of Newfoundland and Saskatchewan. In other provinces, the program is also administered by the Department of Health but under the direct responsibility of an officer other than the Deputy Minister of Health. For example, in British Columbia, the Deputy Minister of Hospital Insurance and in Alberta, the Director of the Hospitals Division of the Department of Public Health, are the responsible officers, and these officers report directly to the respective Ministers of Health. Similarly, in Manitoba, a Commissioner of Hospitalization has been appointed in the Department of Health and Public Welfare, and this officer is responsible directly to the Minister of Health and Public Welfare.

In four provinces, Commissions have been set up, charged with the responsibility of administering the Hospital Insurance and Diagnostic Services program in the province. In all instances, the responsible officer in the Commission reports directly to the Minister of Health. This pattern has been adopted in the Provinces of Ontario; New Brunswick; Nova Scotia and Prince Edward Island.

A list of the provincial authorities will be found in Appendix A.

3. Benefits

(i) In-Patient Services

All of the provinces provide the basic in-patient services required by the Hospital Insurance and Diagnostic Services Act to be provided.

Some of the provinces expressed the wish to separate certain public health procedures carried out routinely in the hospital, from insured services. For example, in the provinces of Prince Edward Island, Ontario, Manitoba, Saskatchewan and British Columbia, admission chest x-rays and syphilis serology are not included as insured services. However, these public health procedures supported by the Health Grants, continue to be provided without charge to all persons admitted to the hospitals in the provinces. In the other provinces, these procedures are insured services.

(ii) Out-Patient Services

Since the provision of out-patient services is optional, there is considerable variation between the provinces in the area of out-patient services.

Alberta does not provide any out-patient services under the joint federal-provincial program, although the province has provided out-patient services limited to recipients of public assistance since April 1, 1959. This program may not be included in the Agreement under the Hospital Insurance and Diagnostic Services Act because it fails to meet the requirements of the law with regard to uniform availability on equal terms and conditions to all residents of the province.

In the Agreement with British Columbia, no out-patient services are listed, although emergency services and minor surgical procedures are included in the provincial program on payment of a \$2 authorized charge.

A common feature of out-patient services provided under the hospital insurance programs in a number of provinces, is the provision of a fairly broad range of services in the event of an emergency. In Saskatchewan, Manitoba (except when the Commissioner is satisfied that the services could not be obtained in the specified period), and Ontario, these out-patient services are provided within a period of twenty-four hours; in Nova Scotia, they are provided within forty-eight hours; and in New Brunswick, no specified period of time has been set by law.

In Ontario, out-patient services are only provided in the event of an emergency. The provinces of Saskatchewan, Manitoba, New Brunswick, Nova Scotia, Prince Edward Island and Newfoundland all provide additional out-patient services.

In Saskatchewan, out-patient services include the pathological examination of tissue; cancer services; and the examination of and reporting on clinical and diagnostic specimens, by the provincial laboratories.

In Manitoba, minor surgical procedures, as designated, and electro-shock therapy are provided as insured out-patient services.

In New Brunswick, diagnostic and treatment procedures, as authorized; and the services of the provincial laboratory, as specified; as well as physiotherapy facilities where available, when used for medical rehabilitation; are all insured out-patient services.

Nova Scotia provides minor medical and surgical procedures; blood, including blood fractions; radiotherapy for malignancy; physiotherapy, where available; the services of the tumour clinic; and specified diagnostic examinations; as insured out-patient services;

Prince Edward Island provides laboratory and radiological procedures, as specified, including the use of radioactive isotopes; drugs, biologicals and related preparations for emergency diagnosis and treatment; and all of the other services prescribed as in-patient services in the federal Act.

In Newfoundland, selected diagnostic and treatment procedures are provided as insured out-patient services.

4. Methods of Provincial Financing

(i) Charges not related to Specific Services

Since the provinces were free to devise their own methods for financing the provincial share of costs, a variety of methods of financing has emerged. Five provinces use a premium method; two provinces finance their share of costs out of general revenue; one province has levied a hospital tax; and another province levies a property tax. In some instances, a combination of these methods is used.

The premium method is used in Saskatchewan, Manitoba, Ontario, New Brunswick, and Prince Edward Island.

The annual premium, or hospitalization tax as it is called, in Saskatchewan is \$17.50 for single persons and \$35.00 for families. The funds derived from the hospitalization tax are augmented by general revenue funds.

The Manitoba monthly premium is \$2.05 for single persons and \$4.10 for families. A compulsory payroll deduction is applied for employed groups of three or more persons. Provision is also made to exempt from this group certain categories of persons for such reasons as temporary or part-time employment.

The Ontario monthly premium of \$2.10 for single persons and \$4.20 for families, entitles insured persons in Ontario to insured services and, in addition, to services over and above those included in the Agreement under the Hospital Insurance and Diagnostic Services Act. The provincial program in that province includes insured services in mental hospitals and tuberculosis sanatoria. There is a compulsory payroll deduction clause in the Ontario law in relation to establishments of fifteen or more employees including the employer. Unlike the majority of provinces, this category of residents is the only category with respect to whom insurance coverage is compulsory in the province.

The monthly premium levied in New Brunswick is \$2.10 for single persons and \$4.20 for families. Employers of five or more employees are required to make a payroll deduction and to remit the premium payments to the Commission. Exceptions are permitted in connection with such circumstances as partial or temporary employment.

In Prince Edward Island, the monthly premium is \$2.00 for single persons and \$4.00 for families. All members of employee groups of three or more, are compulsorily covered, with the usual exceptions, and a payroll deduction method of collection of premiums is prescribed. The province may also designate co-operatives and other groups who, when so designated, are compulsorily covered under the provincial plan. Enrolment is voluntary for residents of the province not coming within these categories.

In all the premium provinces, with the exception of New Brunswick, reduced premium rates are levied with respect to the families of armed services personnel and members of the R.C.M.P.

British Columbia finances the provincial share of costs out of the general revenue of the province. Part of a provincial sales tax is paid into the general revenue fund for hospitals insurance. Similarly, Newfoundland also finances its share of costs out of general revenue

When the Hospital Insurance and Diagnostic Services program came into operation in Nova Scotia, a three per cent hospital tax was also inaugurated and the funds derived from this sales tax are used to finance the provincial share of costs.

Alberta raises a portion of its share of costs from a mill rate levied on property.

(ii) Authorized Charges

Only two provinces have included in their Agreement, provisions for levying charges directly to patients for insured services. These deterrent or co-insurance charges are related to in-patient services in British Columbia, where a charge of \$1.00 per day of hospital care is imposed, and in Alberta, where the charge varies between \$1.50 and \$2.00 per day (\$1.00 per day for a newborn), depending upon the category of the hospital. The charge of \$2.00 referred to above in connection with the out-patient services in British Columbia, is not a part of the joint federal-provincial program.

5. Recipients of Public Assistance

With the exception of Newfoundland and Nova Scotia where they are automatically covered, recipients of public assistance are subject to special arrangements which have been made in the provinces to cover payments of premiums or authorized charges on their behalf.

In British Columbia and Alberta, the authorized charges levied on insured persons in connection with hospital care, are paid by the provincial welfare authorities. In Saskatchewan, Manitoba and Ontario, recipients of public assistance become insured persons by virtue of the payment of the premium on their behalf by the relevant Department of Welfare. In New Brunswick and Prince Edward Island, these recipients are entitled to a special means test to establish eligibility for payment of the premium on their behalf by the welfare authorities.

Insofar as recipients of assistance from the federal government are concerned, such as persons in receipt of War Veterans Allowances, the federal government pays to the provincial authorities the relevant premium or authorized charge on their behalf. Similarly, the federal government pays the premium or authorized charge on behalf of indigent Indian residents of the province who reside on reserves.

6. Waiting Periods for Benefits

As mentioned earlier, waiting periods for benefits of varying lengths have been prescribed, but no province prescribes a longer waiting period than three months. However, not all of the provinces have imposed the full three-month waiting period. In fact, two of the provinces do not prescribe any waiting period for benefits, while one province has limited the waiting period to one month.

A three-month waiting period for benefits is prescribed by the legislation in British Columbia; Saskatchewan; Ontario; New Brunswick; Nova Scotia and Prince Edward Island. In Manitoba, a waiting period of one month is prescribed, while Alberta and Newfoundland do not impose any waiting periods for benefits.

7. Insurance Entitlement Outside of the Province

There are two circumstances in which provinces give entitlement to insured services when the resident is not present in the province in which he is covered by the provincial plan. The first instance is when, maintaining his residence in the home province, he requires hospital services outside of the province. The second circumstance is when a resident changes his place of residence from his home province to another participating province, particularly where a waiting period for benefits is required by the law of the new province. For present purposes, the first circumstance will be described as 'out-of-province benefits' and the second will be described as 'benefits on change of residence'.

(i) Out-of-Province Benefits

All of the provinces make some provision for the payment of insured in-patient services for residents of the provinces receiving care in hospitals situated outside of the home province. Since the federal law does not prescribe specific limitations or basic minima in this regard, the provisions of the provincial laws vary from province to province. The most common circumstance in which out-of-province benefits are paid, is, of course, in the case of an emergency. In other circumstances, some province require the prior approval of the provincial authority. Four provinces set a ceiling on the length of hospitalization which may be recognized under the provincial hospital insurance program. In all of the provinces, payments may be made directly to the hospitals concerned or by reimbursement to the insured person on presentation of a receipted bill.

Under the British Columbia program, benefits are payable within a period of three months' absence from the province in the event of emergency or in cases in which the prior approval has been obtained from the Deputy Minister of Hospital Insurance. The British Columbia plan pays the hospitals in participating provinces, at the per diem rates approved by the provincial authority in that province, less the amount of authorized charges levied in British Columbia (\$1.00 per day). In non-participating provinces, reimbursement may be computed by the Deputy Minister of Hospital Insurance at the rates charged by the hospital or \$12.00 a day (\$4.00 for newborn), whichever is less.

Alberta pays out-of-province benefits in cases of emergency; upon referral; or when the hospital which is situated outside of the province, is more accessible to the Alberta resident than a hospital within the province. The rates at which Alberta pays the hospital (or, on receipt of evidence of payment, reimburses the insured person), may not exceed the rates payable for similar services in Alberta (less the amount of authorized charges) in an amount not to exceed \$13.00 daily.

Saskatchewan pays out-of-province benefits for a maximum period of ninety-two days in Canada (except in Manitoba where no limit is specified), and sixty days annually outside of Canada. The rates payable in participating provinces are the per diem rates fixed by the provincial authority in the participating province. In non-participating provinces and outside of Canada, the average maximum amount payable is \$15.00 daily (\$2.00 for newborn).

Manitoba makes out-of-province payments in the event of emergency; with the prior approval of the Commissioner when adequate care is not available in the province; or when a resident has been supplied with an out-of-province certificate. The amount payable by Manitoba may not exceed the amount which would have been payable for similar services in Manitoba except that, in participating provinces, the amount may be the per diem rate fixed by the provincial authority in that province. The Manitoba law also empowers the Commissioner to enter into agreements with individual hospitals situated outside of Manitoba.

Ontario pays for insured services provided outside of the province by hospitals approved by the Ontario Hospital Services Commission. The amount which is payable to such hospitals, may not exceed a maximum daily charge fixed by the Commission.

In New Brunswick, out-of-province benefits are provided in the event of emergency or, when adequate care is not available in the province with the prior approval of the Commission. An out-of-province certificate also entitles a resident to benefits. New Brunswick pays the appropriate rate established for a participating hospital in a participating province. But the highest per diem rate which is payable may not exceed ten per cent over and above the amount which would have been payable in a hospital in the province. However, the Commission may enter into an agreement with a hospital outside of the province for the provision of insured services, to residents of New Brunswick.

Out-of-province benefits are paid by Nova Scotia for not more than three months in a period of twelve consecutive months. Benefits are payable in case of emergency or with the prior approval of the Commission. The amount which is payable, may not exceed the per diem rate set by the provincial authority in a participating province. Other than in participating provinces, the amount payable is calculated on the basis of an average daily charge of \$14.00 (\$5.00 for newborn), or the all-inclusive daily rate in the hospital, whichever is less. Out-of-province benefits are not paid by Nova Scotia for out-patient services.

In Prince Edward Island as well, out-of-province benefits are payable for up to three months in a period of twelve consecutive months. They are paid in cases of emergency or with the prior approval of the Commission. In participating provinces, the amount payable may not exceed the per diem rate set by the provincial authority in that province for the hospital concerned. In hospitals outside of participating provinces, the amount payable may not exceed an amount calculated on the basis of an average daily rate of \$14.00 (\$5.00 for a newborn) or the all-inclusive daily rate of the hospital, whichever is less. In cases where the prior approval of the Commission has been obtained for hospital care elsewhere than in a participating province, the amount payable is calculated on the basis of the standard ward accommodation rate in the hospital concerned. Prince Edward Island does not cover out-patient services received out of the province.

Like many of the other provinces, Newfoundland also provides out-of-province benefits in cases of emergency or with the prior approval of the Minister. The amount payable in participating provinces is that established by the provincial authority in that province for the hospital concerned. Outside of participating provinces, the amount payable may not exceed the amount which would have been paid in a comparable hospital in Newfoundland.

(ii) Benefits on Change of Residence

All the participating provinces provide coverage for a period up to three months, generally exclusive of travelling time, for residents who move to another participating province, in the event that a waiting period for benefits is imposed in the new province. The purpose of this provision in the provincial laws, is to ensure that no insured resident of one participating province, will suffer any break in coverage on change of residence to another participating province.

8. Method of Fixing Rates and Making Payments to Hospitals

In most provinces, the provincial authority has established a Rate Board charged with the responsibility of examining the annual budget estimates of individual hospitals and making recommendations to the provincial authority with regard to approved rates of payment. These Rate Boards operate in British Columbia, Saskatchewan, Manitoba (a Hospital Budget Committee), Ontario, New Brunswick, Nova Scotia and Prince Edward Island. In Alberta and in Newfoundland the responsibility for fixing the rates payable to individual hospitals, rests with the Minister of Health.

There is some variation in methods between the provinces, even those operating with the assistance of Rate Boards. For example, in British Columbia a system of "firm budgets" is used, although like the other provinces, adjustments may be made having regard to fluctuations during the course of the year.

Most provinces require that the hospitals submit to the provincial authority, admission-discharge forms for every patient in the hospital. In addition to annual budget estimates, the hospitals in most provinces are required to submit monthly returns showing statistics on patient movement; and actual income and expenditures. These returns are used to assess the adequacy of the rates. Most of the provinces make provision for the review of established rates during the year, at the request of the hospital or the provincial authority. At the end of the year, the hospitals are required to submit audited statements including an abstract of the income, expenditures, assets and liabilities of the hospitals up to the end of the calendar year. Expenditures are then reviewed in relation to the estimated budget and final adjustments if necessary are then made on the basis of approved expenditures.

In Alberta, per diem rates are fixed by ministerial order based initially on the rate which had been applicable in the previous year. At the end of the year, the audited costs of each hospital are reviewed and retroactive adjustments, where necessary, are then made by further ministerial order.

In most provinces, payments to public hospitals are made on the basis of combined fixed semi-monthly or monthly payments, and variable per diem amounts. The rates payable to contract hospitals and federal hospitals are generally negotiated rates related to costs or, in the case of federal hospitals, the rates fixed for hospitals in the province which are similar having regard to size, facilities, standards of service and location.

9. Technical Advisory Services

In most provinces, the provincial authority has set up, or is planning to set up, consultant services to advise the provincial authority in specialized areas, and to be available to advise the participating hospitals in the provinces. For the most part, the consultant services are in the fields of medicine; administration; nursing; medical records; radiological and laboratory services; accountancy; dietetics and pharmacy. In at least one province, medical social work consultant services are available.

In Alberta, the consultant services are not provided directly by the provincial authority for the most part. The province intends to rely on the Alberta Hospital Association to provide these consultant services. The pattern in Newfoundland also varies somewhat from the other provinces since the government itself operates half of the hospitals in the province. However, here too, certain consultant services are available.

V. THE NUMBER OF PERSONS COVERED

In presenting data related to the number of persons covered by the provincial programs, regard must be had to the varying methods used by the provinces for the purpose of calculating the number of insured persons. In provinces which levy a premium, insured persons are registered and identification certificates are provided. However, the methods of registration in some provinces consist of the registration of single persons on the one hand, and family heads on the other. Thus, in some of these premium provinces, it is possible to give the precise number of single subscribers and of family subscribers; the number of persons covered by the family subscriber, however, is not known since the family rate applies wherever a family head has one or more dependants.

In order to make a more precise count with regard to the family groups in premium provinces where no head count is made, therefore, it has been necessary to calculate the number of dependants in the average

family unit in the province. In this way, it is possible to estimate the number of persons in the province eligible for and entitled to insured services at the end of each month, an estimation which is required to be made in connection with the amount of the federal contribution and contained in the formula set out in the Act.

In provinces where no premiums are levied and where the provincial share of costs is paid out of general revenue, sales or property tax, no individual registration of insured persons is required, and coverage is universal. Insofar as these provinces are concerned, provision was made in the Agreements for calculation on the basis of a population estimate for a given date in the year (June 1) as determined by the Dominion Statistician.

The Hospital Insurance Regulations define population for the purposes of the Hospital Insurance and Diagnostic Services legislation, to mean the population of Canada or of the province, as certified by the Dominion Statistician, and, calculated for a calendar year in which a census was taken, as the population of Canada or of the province as ascertained by the census; for other than a census year, the population of Canada or of the province on the 1st day of June in that year according to published original intercensal estimates of the Dominion Statistician. In both instances the number of the members of the regular forces, members of the Royal Canadian Mounted Police and persons serving terms of imprisonment in a federal penitentiary are deducted so as to provide a net population figure for the purpose of calculating the eligible population.

During the course of the fiscal year under review, the Dominion Statistician supplied net population estimates for June 1, 1958 and an advance estimate for June 1, 1959. These estimates were used in calculating the amount of the advance payments to Newfoundland, Nova Scotia, Alberta and British Columbia. The estimate for June 1, 1958, was applied to advance payments up to and including December 1958, while the advance estimate for June 1, 1959 was used for advance payments for January to March 1959, inclusive.

Although Manitoba is a premium province in which provincial registration records would normally be used for calculating the estimated number of insured persons, as in Ontario and Saskatchewan, the provincial registration records in that province were in the process of being established and it was found to be impractical to attempt to eliminate the duplicate registrations which were found during the initial period.

Since all residents of Manitoba were entitled to receive insured services without the payment of the premium until December 31, 1958, the net estimates of the population made by the Dominion Statistician for June 1, 1958, were used until that date for purposes of advance payments. For the first three months of 1959, however, when entitlement in Manitoba was subject to the payment of the premium, the number of the insured population was no longer amenable to the calculation used previously since universal coverage was no longer automatically available. As an interim measure, therefore, pending the elimination of the duplicate registrations, the Agreement with Manitoba was amended so as to set out a method for determining the insured population for the months of January, February and March, 1959. For these months the advance payments were made on the basis of ninety-five per cent of an adjusted net population determined by the Dominion Statistician. The deduction of five per cent from this net population was based on an estimate of the unknown number of non-insured residents of the province. The final contribution for Manitoba for 1958 will, of course, be based on the actual number of registrations.

As mentioned above, the provincial registration records in Ontario and Saskatchewan were used to estimate the number of insured persons. In Saskatchewan, the dependants as well as the family heads, are registered so that an actual count of the number of insured persons is available from the registration records. In Ontario, on the other hand, dependants are not registered other than through the registration of the family head. In order to calculate the number of persons in the family group in Ontario, therefore, it has been necessary to obtain the average number of dependants in the Ontario family. This estimate was made by the Dominion Statistician and for purposes of advances, the average number of dependants in Ontario has been calculated to be 2.42 persons.

Table A shows the estimated population, by provinces, as certified by the Dominion Statistician in accordance with the definition of population contained in the Hospital Insurance Regulations, for June 1st, 1958 and June 1st, 1959 (advance estimates).

Table B shows the estimated number of insured persons at the end of each month, by province, for the fiscal year ending March 31, 1959 used for the purposes of calculating the advance payments to participating provinces.

As mentioned earlier, only five* provinces were operating hospital insurance programs from July 1, 1958, until the end of the calendar year. During that time, the monthly average of insured persons in Canada was 4,876,698. Thus, 28.6 per cent of the total population of Canada, or 28.8 per cent of the net population certified by the Dominion Statistician, was covered.

With the introduction of programs in Ontario and Nova Scotia on January 1, 1959, the number of insured persons increased and during the first three months of 1959, a monthly average of 11,158,550 persons were insured. By the end of the fiscal period under review, 64.0 per cent of the population of Canada, or 64.5 per cent of the net population, were covered by hospital insurance in the seven provinces operating programs at the time.

* British Columbia, Alberta, Saskatchewan, Manitoba and Newfoundland.

TABLE A
NET POPULATION, BY PROVINCES AS CERTIFIED BY
THE DOMINION STATISTICIAN

Province	June 1, 1958	* June 1, 1959
Newfoundland	436,000	446,000
Prince Edward Island	99,000	100,000
Nova Scotia	691,000	699,000
New Brunswick	571,000	581,000
Quebec	4,866,000	4,988,000
Ontario	5,759,000	5,894,000
Manitoba	859,000	871,000
Saskatchewan	885,000	899,000
Alberta	1,190,000	1,231,000
British Columbia	1,530,000	1,561,000
Yukon	12,000	13,000
Northwest Territories	20,000	20,000
Canada	16,918,000	17,303,000

* Advance estimate

TABLE B
ESTIMATED NUMBER OF INSURED PERSONS, USED FOR PAYMENT OF ADVANCES,
BY PROVINCE, AT THE END OF EACH MONTH FOR THE FISCAL YEAR ENDED MARCH 31, 1959.

Month	Total	Newfoundland	Nova Scotia	Ontario	Manitoba	Saskatchewan	Alberta	British Columbia
<u>1958</u>								
July	4,863,258	436,000			859,000	849,258	1,190,000	1,530,000
August	4,870,360	436,000			859,000	855,360	1,190,000	1,530,000
September	4,875,992	436,000			859,000	860,992	1,190,000	1,530,000
October	4,879,333	436,000			859,000	864,333	1,190,000	1,530,000
November	4,883,162	436,000			859,000	868,162	1,190,000	1,530,000
December	4,889,787	436,000			859,000	874,787	1,190,000	1,530,000
<u>1959</u>								
January	11,038,871	446,000	699,000	5,461,438	823,650	857,783	1,190,000	1,561,000
February	11,209,029	446,000	699,000	5,578,810	824,600	868,619	1,231,000	1,561,000
March	11,227,751	446,000	699,000	5,591,947	825,550	873,254	1,231,000	1,561,000

VI. PAYMENTS TO THE PROVINCES

As mentioned at the beginning of this Report, the amount of the federal contribution to the provinces, is calculated on the basis of the calendar year. As the calculation of the final contribution for the calendar year 1958 is in process of completion, final details are not available at the time of tabling this Report. It is anticipated, however, that this final contribution will be made within the fiscal year 1959-60. The remainder of this Report, therefore, concerns the advance payments made to participating provinces during the fiscal year 1958-59.

1. Formula for Advances

The fact that the calculations of the final contributions have not yet been completed, has not, in any way, interrupted the flow of advance payments to the participating provinces. The amount of the advance payments is based on a formula contained in the Hospital Insurance Regulations in accordance with which the federal government advances monthly to the provinces for in-patient services, an amount calculated on the basis of twenty-five per cent of provincial payments to hospitals during the month for insured in-patient services; plus twenty-two per cent of the per capita cost of in-patient services in Canada; multiplied by one-twelfth of the estimated number of insured persons in the province for the relevant month. For calculating the amount of the advance for out-patient services, the Regulations provide the simple device of calculating this on a percentage represented by the percentage of the federal advance to provincial payments for in-patient services for the month. From these amounts, the amount recovered by the province in third party liability cases, is deducted.

It should be noted that in the formula for advance payments, there is built in a calculation for hold-back of federal funds to which the province is entitled under the formula for the final contribution. The purpose of this hold-back is to ensure, as far as possible, a minimum of financial re-adjustments after the end of the year.

2. Per Capita Cost of In-patient Services in Canada

Both in the formula relating to the final contribution and in that relating to the amount of the advance, it will be noted that an essential component is the per capita cost of in-patient services in Canada. The per capita cost of providing in-patient services across the country is not a simple one to calculate. It must be based on the costs in all provinces, including the non-participating provinces. Insofar as the

participating provinces are concerned, reporting procedures have been devised which will provide a considerable amount of data which are used in making the necessary calculations, although these data in themselves do not suffice. In non-participating provinces, reliance must be placed on the information supplied by individual hospitals. Obviously the problems associated with the calculation of the national per capita costs, were considerably more difficult in the initial year of the operation of the hospital insurance program than may be anticipated in subsequent years when most of the provinces are participating.

The national per capita cost, having been calculated by the Department, is subject to the approval of Treasury Board. Periodic adjustments are made in the national per capita as indicated on the basis of information which is under continual study in the Department.

The estimated national per capita cost used for the purpose of calculating advance payments for 1958 was \$22.57. This estimate was calculated by estimating the shareable costs in all provinces in Canada, and dividing the aggregate costs by the net population of Canada at June 1, 1958. It remained unchanged during the period under review.

3. Advance Payments to Participating Provinces

The procedure set up for the payment of advances, was designed to facilitate prompt payment to the provinces. In order to achieve this end, the full co-operation of the federal treasury auditors was obtained both at the federal level and in the provinces. A simple form has been devised on which is shown for each month, amounts paid by the province for insured services to insured residents. The estimated number of insured residents at the end of the month is also shown. This form, signed by the provincial authority and the provincial auditor, is certified by the federal Treasury auditor in the province and the completed form is then sent to Ottawa. The calculation of the advance is made in the Department and, on certification by the Minister of National Health and Welfare, the monthly advance is transmitted by the Comptroller of the Treasury to the province. The lapse of time in Ottawa between the receipt of this form from the province and the dispatch of the payment to the provinces, has been between two and fourteen days with an average of seven days. The payment of the initial claim for an advance to each participating province has been subject to the approval of Treasury Board. Payments have been going forward regularly without major difficulty.

In the three tables below, details are shown of figures related to the advance payments made to the participating provinces. In Table C, some details concerning the estimated national per capita cost for 1958 are shown.

Table D shows the amounts of the advance payments to the participating provinces which totalled almost fifty-five million dollars. As noted earlier, five provinces participated in the joint program for nine months, while two provinces participated in the joint program for only three months during the fiscal year under review.

The details required to be proved by the provinces in respect of claims for advance payments are shown in Table E. These consist of the particulars of payments made by the province to various types of hospitals for in-patient and out-patient services. It will be seen that the amounts recovered by the provinces in respect of third party liability, were small in 1958-59. It should be noted that a lengthy time-lag is inevitable following the establishment of collection procedures of this type. In addition, there were certain problems in some provinces requiring legislative action and these could only be rectified when provincial legislatures were in Session. However, by the end of the fiscal year under review, these legislative problems had been settled. The details of the calculation of the advances are also shown on Table E.

In examining the details of the advance payments to the provinces, it should be kept in mind that these are calculated in a manner which differs radically from the method used in the calculation of the final contribution. While the advance have been paid on the basis of provincial payments to hospitals, the final contribution is calculated on the basis of shareable costs as defined in the federal legislation and described in Part I above. A considerable amount of work is necessary at various levels in order to establish the final shareable costs. The hospitals must keep records throughout the year and prepare final statements following the year end. The hospitals auditors review the final statements, and these are then scrutinized closely by the provincial authorities. Shareable costs are calculated separately for each hospital and this calculation must be approved by the provincial authority and certified by a provincial auditor and the federal treasury officer in the province. For these reasons, it will be apparent that the amounts of the final contributions which are now being calculated, may differ in some degree from the amounts paid in the form of advance payments.

TABLE C

ESTIMATE OF IN-PATIENT SHAREABLE COST, "NET" POPULATION
AND PER CAPITA COST, BY PROVINCES - YEAR 1958

Province	In-Patient Shareable Cost	"Net" Population	Per Capita Cost
<u>Participating Provinces</u>			
Newfoundland	5,541,024	436,000	12.71
Manitoba	21,520,860	859,000	25.05
Saskatchewan	28,850,725	885,000	32.60
Alberta	31,851,500	1,190,000	26.77
British Columbia	38,310,300	1,530,000	25.04
Total	\$126,074,409	4,900,000	\$25.73
<u>Non-Participating Provinces</u>			
Prince Edward Island	1,358,500	99,000	13.72
Nova Scotia	12,722,000	691,000	18.41
New Brunswick	11,516,900	571,000	20.17
Quebec	95,644,000	4,866,000	19.66
Ontario	133,627,221	5,759,000	23.20
N.W.T. & Yukon	952,000	32,000	29.75
Canada	\$381,895,030	16,918,000	\$22.57

TABLE D
PAYMENTS OF ADVANCES TO PARTICIPATING PROVINCES
FISCAL YEAR, 1958-59

Month	Total	Newfoundland	Nova Scotia	Ontario	Manitoba	Saskatchewan	Alberta	British Columbia
1958								
July	4,084,465.21	274,253.46			743,107.43	874,487.53	888,710.04	1,303,906.75
August	4,258,593.73	307,666.93			770,538.07	899,599.04	935,203.77	1,345,585.92
September	4,343,468.37	315,330.97			783,013.44	961,912.35	938,820.55	1,344,391.06
October	4,311,540.56	315,148.22			799,056.34	932,117.50	949,799.02	1,315,419.48
November	4,432,406.37	327,060.90			810,806.36	936,900.70	986,664.96	1,370,973.45
December	4,594,003.36	304,581.02			827,296.09	944,624.49	1,117,223.48	1,400,278.28
1959								
January	8,598,873.32	341,838.60	489,909.12	3,562,438.38	794,105.76	943,624.72	1,007,863.12	1,459,093.62
February	9,523,663.49	338,446.62	513,079.62	4,614,124.71	792,338.49	946,376.46	898,195.61	1,426,101.98
March	10,556,459.65	333,560.12	569,793.90	4,963,650.03	828,272.99	990,799.14	1,052,095.13	1,818,288.34
Totals	54,708,474.06	2,857,886.84	1,572,782.64	13,140,213.12	7,148,534.97	8,430,441.93	8,774,575.68	12,784,038.88

TABLE E

PARTICULARS OF PAYMENTS BY PARTICIPATING PROVINCES, FOR HOSPITAL CARE,
REPORTED FOR PURPOSES OF CLAIMING ADVANCES, AND PARTICULARS OF THE
COMPOSITION OF THE ADVANCES, FISCAL YEAR 1958-59

Total	Newfoundland	Nova Scotia	Ontario	Manitoba	Saskatchewan	Alberta	British Columbia
109,356,226.24	4,256,473.37	2,614,348.60	24,023,353.05	15,116,204.00	20,125,419.31	16,484,694.00	26,735,733.91
384,284.37	83,980.30	-	-	-	-	15,282.49	285,021.58
1,154,856.20	319,438.00	-	419,450.00	66,124.50	69,898.14	6,054.50	273,891.06
2,441,158.10	-	33,356.40	265,652.20	621,798.00	186,713.84	601,887.61	731,750.05
860,122.55	33,561.33	1,052.35	49,112.76	135,197.67	325,047.44	128,185.10	187,965.90
114,196,647.46	4,693,453.00	2,648,757.35	24,757,568.01	15,939,324.17	20,707,078.73	17,236,103.70	28,214,362.50
28,137.38	1,560.55	-	1,543.01	1,713.41	-	-	23,320.41
114,168,510.08	4,691,892.45	2,648,757.35	24,756,025.00	15,937,610.76	20,707,078.73	17,236,103.70	28,191,042.09
409,878.29	81,275.16	77,418.13	141,840.00	16,000.00	93,345.00	-	-
3,412.50	1,038.50	-	655.00	1,504.00	215.00	-	-
386.00	-	-	55.00	40.00	291.00	-	-
984.75	222.50	-	-	762.25	-	-	-
414,661.54	82,536.16	77,418.13	142,550.00	18,306.25	93,851.00	-	-
638.00	466.00	-	172.00	-	-	-	-
414,023.54	82,070.16	77,418.13	142,378.00	18,306.25	93,851.00	-	-
28,542,127.59	1,172,973.14	662,189.35	6,189,006.25	3,994,402.69	5,176,769.69	4,309,025.93	7,047,760.54
25,959,748.83	1,636,099.29	867,703.65	6,882,125.09	3,156,256.49	3,215,736.22	4,465,549.75	5,736,278.34
54,501,876.42	2,809,072.43	1,529,893.00	13,071,131.34	7,140,659.18	8,392,505.91	8,774,575.68	12,784,038.88
206,597.64	48,814.41	42,889.64	69,081.78	7,875.79	37,936.02	-	-
54,708,474.06	2,857,886.84	1,572,732.64	13,140,213.12	7,148,534.97	8,430,441.93	8,774,575.68	12,784,038.88

AMOUNTS PAID BY PROVINCE
FOR INSURED SERVICES TO
INSURED RESIDENTS

IN-PATIENT SERVICES

Hospitals listed in Part I of
Schedule "A": Services
Equipment
Contract hospitals in province
Federal hospitals in province
Hospitals outside the province

Total
Less: Amounts recovered
(Sec. 5(2) (d) Act)

Net payments

OUT-PATIENT SERVICES

Hospitals listed in Part I of
Schedule "A": Services
Contract hospitals in province
Federal hospitals in province
Hospitals outside the province

Total
Less: Amounts recovered
(Sec. 5(2) (d) Act)

Net payments

CALCULATION OF ADVANCES

In-patient services:

25% of provincial payments
22% of national per capita

Sub total
Out-Patient Services

Total advances

VII. CONCLUSION

In this Report, developments in the hospital insurance and diagnostic services program are outlined and summaries of federal and provincial legislation in force during the initial period of the programs until the end of 1959, are given. The methods of procedure and interdepartmental and intergovernmental relationships are described. Figures are provided covering the estimated number of insured persons for advance purposes and the amounts of the advance payments made to the provinces from the inception of the program on July 1, 1958 until the end of the fiscal year ended March 31, 1959.

To complete this first Report to Parliament, a word of appreciation must be recorded to the provincial authorities in all of the participating provinces who have worked closely and conscientiously with members of the Department of National Health and Welfare and with representatives of other federal Departments comprising the federal 'team'. The Department of National Health and Welfare has also benefited from the close collaboration afforded it by the officers of other federal Departments. The Minister of National Health and Welfare has been gratified by the manner in which members of his own staff have carried out their duties in connection with the hospital insurance and diagnostic services program.

Not unexpectedly in the early stage of a program as large and complex as hospital insurance, many technical problems have arisen from time to time. That these problems have been satisfactorily resolved, is a reflection of the constructive and helpful attitude of the provincial authorities, the hospital authorities and medical staffs.

APPENDIX A

PROVINCIAL AUTHORITIES

ADMINISTERING HOSPITAL INSURANCE AND DIAGNOSTIC
SERVICES PROGRAMS

NEWFOUNDLAND

Dr. Leonard Miller,
Deputy Minister of Health,
St. John's, Newfoundland.

PRINCE EDWARD ISLAND

Dr. L.E. Prowse, Chairman,
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P.O. Box 3000,
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Mr. H.W. Murdock, Chairman,
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Box 1057,
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NEW BRUNSWICK

Dr. D.A. van Binnendyk,
Executive Director,
Hospital Services Commission of
New Brunswick,
P.O. Drawer 1297,
Fredericton, N.B.

ONTARIO

Dr. R.W. Ian Urquhart, Chairman,
Ontario Hospital Services Commission,
Parliament Buildings,
Toronto, Ontario.

MANITOBA

Mr. G.L. Pickering,
Commissioner of Hospitalization,
Manitoba Hospital Services Plan,
Box 925, 185 Lombard Ave.,
Winnipeg 2, Manitoba.

SASKATCHEWAN

Dr. F.B. Roth,
Deputy Minister of Public Health,
Provincial Health Building,
Regina, Saskatchewan.

ALBERTA

Mr. J.D. Campbell, Director,
Hospitals Division,
Department of Public Health,
Room 228, Administration Building,
Edmonton, Alberta.

BRITISH COLUMBIA

Mr. Donald M. Cox,
Deputy Minister of Hospital Insurance,
Department of Health Services and Hospital
Insurance,
Victoria, B.C.



Annual Report

of the Minister of National Health and Welfare

Under the

Hospital Insurance

and

Diagnostic Services Act



for the Fiscal Year Ended March 31, 1960

ANNUAL REPORT
OF THE
MINISTER OF NATIONAL HEALTH AND WELFARE
ON THE OPERATION OF
AGREEMENTS WITH THE PROVINCES
UNDER THE
HOSPITAL INSURANCE AND DIAGNOSTIC SERVICES ACT
FOR THE FISCAL YEAR ENDED
MARCH 31, 1960.

INDEX

PAGE

I FEDERAL PROGRAM

1. Agreements	2
2. Residents of the Province	4
3. Waiting Period for Benefits	5
4. Insured Services	5
(i) Accommodation and Meals	5
(ii) Necessary Nursing Services	6
(iii) Diagnostic Procedures	7
(iv) Drugs and Related Preparations	8
(v) Operating Room and Anaesthetic Facilities	8
(vi) Surgical Supplies	9
(vii) Radiotherapy	9
(viii) Physiotherapy	9
(ix) Hospital Personnel	10
(x) Other Specified in Agreement	10
5. Period of Entitlement	11
6. Federal Contributions	11
7. Shareable Costs	13
8. Participating Hospitals	15
9. Federal Assistance to Ensure High Standards	17
10. Methods of Federal and Provincial Co-operation	18
11. Methods of Federal Administration	19

II PROVINCIAL PROGRAMS

1. Commencement of Provincial Programs	20
2. Provincial Authorities	20
3. Insured Services	21
4. Methods of Financing Provincial Share of Costs	
(i) Charges Not Related to Specific Services	23
(ii) Authorized Charges	25
5. Recipients of Public Assistance	25
6. Waiting Periods for Benefits	26
7. Insurance Entitlement Outside of the Province	
(i) Out-of-Province Benefits	27
(ii) Benefits on Change of Residence	30

III	NUMBER OF PERSONS COVERED	30
IV	FEDERAL PAYMENTS TO THE PROVINCES	34
	1. Per Capita Cost of In-Patient Services in Canada . . .	34
	2. Advance Payments	36
	3. Final Contributions	38
	4. Total Payments by Canada	38
V	CONCLUSION	42

This is the second Annual Report required to be made by the Minister of National Health and Welfare as soon as possible after the end of each fiscal year, on the operation of agreements with the provinces under the Hospital Insurance and Diagnostic Services Act.

As explained in the previous report, hospital records in Canada, both financial and statistical, are maintained on the basis of a calendar year and, for this reason, the federal contribution to the provinces as set out in the legislation, is also made in relation to the calendar year. On the other hand, the amounts voted by Parliament to be paid as contributions and the period for which this Report is made, are both for a given fiscal year.

This Report contains information concerning the advance payments made to the provinces in accordance with the formula set out in the Hospital Insurance Regulations for the fiscal year ended March 31, 1960 and final payments made to the provinces in accordance with the formula prescribed in the Act for contributions for the calendar year 1958. It will be noted that this Report does not contain administrative statistical data which is derived from the Annual Reports of Hospitals with respect to each calendar year. The Annual Reports of Hospitals for the year 1959, the first full year of operation of the hospital insurance program, are being received from the provinces and being analyzed as this Report goes to press. It is anticipated that the data abstracted from these reports will be available within the course of the coming months.

In order to provide as up-to-date a reference document as possible at the present time, this Report contains descriptions of existing programs up to the end of the calendar year 1960.

I. FEDERAL PROGRAM

The Hospital Insurance and Diagnostic Services Act, was passed by Parliament in April 1957 and was subsequently proclaimed as coming into force on May 1, 1957. An amending Act was passed in June 1958, which facilitated the early inauguration of provincial programs, from July 1, 1958. Meanwhile, the Hospital Insurance Regulations, initially made in February 1958, were amended in June 1958. Separate regulations pertaining to servants of the Crown were also made under the Act where the provincial law required the payment of hospital insurance premiums through payroll deductions.

1. Agreements

The first agreement made between a province and the federal government was the agreement with Ontario signed on March 3rd, 1958; the program in that province, however, did not commence to operate until January 1st, 1959. In June 1958, agreements were signed with Newfoundland on the 9th; British Columbia on the 25th; Alberta and Manitoba on the 27th; and Saskatchewan on the 30th. The joint programs in these five provinces commenced on July 1st, 1958.

The agreements with Nova Scotia, New Brunswick and Prince Edward Island were signed on October 16th, 1958, June 27th, 1959 and July 20th, 1959, respectively, with programs commencing to operate on January 1st, 1959 in Nova Scotia; on July 1st, 1959 in New Brunswick; and October 1st, 1959 in Prince Edward Island.

Subsequently, agreements were signed with the Northwest Territories on March 28th, 1960, and the Yukon Territory on June 29th, 1960, programs commencing to operate in the Northwest Territories on April 1st, 1960, and in the Yukon Territory on July 1st, 1960.

On December 19th, 1960, the agreement signed with the province of Quebec had the effect of bringing within the scope of the program, the residents of all the provinces and the territories, thus ensuring the national character of the Hospital Insurance and Diagnostic Services program. The Quebec program is planned to commence operation on January 1st, 1961.

The federal Act empowers the Minister of National Health and Welfare to enter into agreements with the provinces in connection with the matters for which provision is made in the legislation. These agreements consist of a formal contract and five schedules. The matters which are required to be included in the agreements, and which are prescribed in the Act, include an undertaking by the provinces to make insured services available to all residents upon uniform terms and conditions; to make arrangements to ensure the maintenance in hospitals of adequate standards; to maintain adequate records and accounts in connection with the provision of insured services and the costs; and to permit access to these records and accounts; and to make provision for the recovery of costs in third party liability cases.

The federal government undertakes to pay the provinces the amounts for which provision is made in the Act and to make

available to the provinces reports and records of the calculation of these costs.

The schedules to the agreement include a list of participating hospitals; a list of the in-patient and out-patient services provided under provincial law; a list of the legislative enactments pursuant to which persons are entitled to hospital and diagnostic services; and a list of drugs, biologicals and related preparations provided under provincial law. A particularly important schedule, the details of which are listed in the Regulations, is that in which the Scheme for Administration of the provincial law is described. This schedule contains a broad outline of the methods through which the province carries out its undertakings in accordance with the agreement.

There are some fourteen main headings in the Scheme for Administration which contain the detailed description of the province's method of carrying out its program. The designation of the officer or body appointed to act as the provincial authority for the purpose of the hospital insurance program is stated and the composition of this body is described. A brief description is given of the powers, duties and responsibilities assigned to the provincial authority. The Scheme for Administration contains descriptions of provincial arrangements by which residents of the province become insured persons; the arrangements by which insured services are made available to insured persons and generally the arrangements pertaining to the particular province concerning entitlement and eligibility procedures, on the one hand, and hospital arrangements for establishing eligibility, on the other hand.

Of particular importance are the sections pertaining to the provincial arrangements for the licensing, inspection and supervision of hospitals and the arrangements in the province to ensure the maintenance of adequate and proper standards of care. Descriptions are also given of the provincial arrangements for the effective utilization of insured services provided through the program and the arrangements for maintaining records and statistical reports.

The maintenance of records and statistical reports concerns both the provincial authority and the individual participating hospitals. Outlines of the type of financial data used in the preparation of provincial reports and returns relating to federal contributions, are therefore given. In this connection, an outline of the arrangements for the payment of amounts to hospitals in respect of the cost of insured services and the arrangements for the review

of hospital budgets and financial statements are described. Since the provinces differ in methods of financing the provincial share of costs, it is necessary for each province to describe its own methods of determining the number of insured persons in the province.

Since the responsibility for the planning and development of hospital resources and services rests with the provinces, a section in the Scheme for Administration is allocated to an outline of these arrangements in each province.

There are a number of other matters required by the law to be arranged by the province, such as the method for the recovery of the cost of insured services in third party liability cases, and a description of these methods also forms a part of the Scheme for Administration.

2. Residents of the province

The federal Act prescribes that the province must make insured services available to all residents on uniform terms and conditions. In effect, therefore, there may be no exclusions on grounds of age, income or pre-existing conditions. Residents are defined in the Regulations as persons legally entitled to remain in Canada, who make their home and are ordinarily present in the province; tourists, transients or visitors to the province are specifically excluded.

Certain residents who have entitlement to the same type of services as provided under the hospital insurance program, are not covered by the provincial program. These include members of the armed forces and of the Royal Canadian Mounted Police. In addition, where residents are entitled to similar services under statutes such as Workmen's Compensation, their entitlement under such laws excludes them from entitlement to the same services under the hospital insurance program.

Certain categories of residents, such as Indians on reserves and recipients of War Veterans Allowances, for whom the federal government had been providing hospital coverage prior to the inception of the hospital insurance program, are entitled to the same benefits as other residents. In order to continue to bear the responsibilities which had been assumed by the federal government over a period of years, however, the federal government accepts certain responsibilities for the payment of premiums or co-insurance charges in respect of these persons, where such levies are made

under the provincial law. This arrangement parallels the arrangements made in the provinces and described later in connection with recipients of public assistance.

3. Waiting periods for benefits

Although the federal Act states that no specified period of residence may be required as a condition precedent to the establishment of residence in the province, waiting periods for entitlement to benefits are permitted. Not all of the provinces felt impelled to impose a waiting period and, consequently, a varied pattern of waiting periods has emerged. No province, however, prescribes a waiting period in excess of three months.

To ensure coverage for insured persons who were residents of one participating province and who move their place of residence to another participating province in which a waiting period for benefits is prescribed, the Regulations permit that such a person may be deemed to continue to be a resident of the original province during such waiting period up to a maximum of three months. As a result of discussions between the provinces, the laws of all provinces now ensure continuing coverage on change of residence between participating provinces.

4. Insured services

The federal Act makes provision for contributions to the provinces with respect to the cost of insured services which are defined to mean both in-patient and out-patient services to which residents are entitled under provincial law. In order to participate in the program, the province is required to provide a range of defined in-patient services. In addition, the province is given the option of providing as out-patient services the same type of services as those specified in the law for in-patients. However, the federal law does not require that out-patient services be made available in the provincial program, thus permitting a province either to exclude these services entirely or to include one or more, as the province deems suitable in the light of circumstances in the province.

The services set out in the Act are as follows:

- (i) Accommodation and meals at the standard or public ward level;

Accommodation at the standard ward level is an insured service; for semi-private ward or private ward care, insured

persons are responsible for that part of the payment for the preferred accommodation which is in excess of the standard or public ward rate set for the individual hospital. The federal law does not require that the provinces control the rates charged for preferred accommodation. Nor does the federal law require that the provinces control the percentage of accommodation to be set aside in a hospital as standard or public ward accommodation. However, both of these matters are subject to provincial control in some provinces under provincial law or by administrative procedure.

The income derived by hospitals for preferred accommodation is discussed later in this report. For present purposes, therefore, suffice it to say that under the Hospital Insurance Regulations, fifty per cent of the amount derived by hospitals from this source is deducted from the costs of providing insured services. The provinces were free to decide whether, in turn, they would leave with the hospitals a similar percentage. In fact, however, the provinces vary considerably in this regard.

Insofar as insured persons themselves are concerned, voluntary insurance is available in all provinces to cover the costs of semi-private or private accommodation, even in those provinces (Manitoba, Ontario, Quebec, and Prince Edward Island) in which voluntary insurance for hospital care at the standard or public ward level has been prohibited.

(ii) Necessary nursing service;

Necessary nursing service does not include the provision of a private nurse in the usual sense. As are insured services, it includes only the degree or level of nursing care which the patient's medical condition requires. For the most part, this level of nursing care is provided by the regular nursing staff of the hospital. Where the patient's medical condition requires special nursing duty at a level over and above that which can be provided by the regular nursing staff of the hospital, then the decision as to the method by which the necessary additional nursing service is provided, is the responsibility of the director or supervisor of nursing. If, in order to provide the medically necessary level of nursing, an additional nurse must be employed, either to release one of the regular nurses or herself to provide the special nursing, then this is included as an insured service.

Some misunderstandings have arisen where, for the additional comfort of the patient, private nurses have been brought in. Necessary nursing means medically necessary care only and does

not mean the additional employment of any nurse, although in certain circumstances, such as those discussed above, this may apply.

Insured persons are, of course, free to employ private nurses for their own comfort. In such circumstances, however, the costs entailed in the employment of the private nurse are the sole responsibility of the insured person.

- (iii) Laboratory, radiological and other diagnostic procedures together with the necessary interpretations for the purpose of maintaining health, preventing disease and assisting in the diagnosis and treatment of any injury, illness or disability;

The provision of laboratory, radiological and other diagnostic procedures as well as the necessary interpretations of these procedures, is considered to be an intrinsic part of good hospital care. Consequently, they have been built into the legislation and have been made one of the required in-patient services which a province must make available in order to participate in the program. The federal law does not specify the manner in which these procedures must be made available and the provinces were free to devise their own methods. In some areas, the facilities and staff of one hospital may be used not only for its own patients, but may also be used in accordance with a provincial regional arrangement; the smaller hospitals in the area are thus able to provide the requisite diagnostic procedures to their patients through the use of the diagnostic facilities and staff of the other hospital.

While not all diagnostic procedures require specialized interpretations, such interpretations must be made available under the insurance program where these are necessary. Here again, the provinces have been free to devise their own methods both for ensuring the availability of the necessary interpretations and in devising methods for the remuneration of specialists providing these interpretations.

The types of procedures which are required to be provided are not defined in the federal law but are generally the type of diagnostic procedures commonly used in hospitals.

Prior to the inception of the hospital insurance program, certain public health diagnostic procedures were being carried out in hospitals particularly with regard to the detection of tuberculosis

and venereal disease. These procedures are, of course, diagnostic procedures as described in the federal law. However, some provinces preferred to continue the method previously used in regard to these public health procedures and, since patients in the hospitals are not charged a fee in relation to these, it was agreed that where a province so chose, admission chest x-rays and syphilis serology would be deemed not to be insured services. The provinces of Prince Edward Island, Ontario, Manitoba, Saskatchewan and British Columbia have excluded these procedures from the list of in-patient benefits. The federal government contributes to the costs through the health grants program.

- (iv) Drugs, biologicals and related preparations as provided in an agreement when administered in the hospital;

It should be noted that while the federal law requires that drugs, biologicals and related preparations be provided as an insured service, the extent to which these are provided is left to the discretion of the provinces. In order to ensure that the provincial decision with regard to drugs meets the accepted standards of care, the law requires that the province describe in the agreement the drugs, biologicals and related preparations which, under its law, are insured services.

In most provinces, the drugs which are provided are those which, in the judgment of the physician, are required in accordance with accepted practice and sound teaching; proprietary or patent drugs are generally excluded.

It should be noted that the preparations for which provision is made in this section of the law, are insured only when administered in the hospital. The practice of providing patients with a supply of drugs from the hospital on discharge, may not be continued without making a charge for those drugs supplied for home use. Of particular importance is the fact that where drugs are insured as part of out-patient services, take-home drugs are also excluded.

Among the insured items provided by all the provinces, are blood transfusions and other blood products. These are supplied through the Canadian Red Cross.

- (v) Use of operating room, case room and anaesthetic facilities, including necessary equipment and supplies;

Although the law does not require the availability physically within the listed hospital of an operating room and other facilities, it is required that these facilities must be available to insured

persons. Here again, as in the case of diagnostic procedures, the province may plan regionally so that the facilities of a larger hospital are available for the use of insured persons in a smaller hospital in which the facilities may not be physically available. In all circumstances, these facilities are insured and no charge may be made to the insured person for their use.

While all of the equipment and supplies required to be used in the operating room, the case room, or for purposes of administering an anaesthetic, are insured services, the services of the surgeon or the anaesthetist are excluded. Thus, although an insured person may not be charged for the use of the facilities, charges may be made by the doctors including anaesthetists utilizing the facilities.

(vi) Routine surgical supplies;

It has already been noted that the supplies used in the operating or case room are insured services; surgical supplies used elsewhere in the hospital are also covered by the program. In effect, this includes surgical dressings following an operation or, in other circumstances, in the course of hospital care. It should be noted, however, that surgical supplies do not include such items as prosthetic appliances. An appliance, such as a brace or surgical aid of any sort, designed specifically for the use of the patient following discharge from hospital, is not an insured service. It might be noted here that federal assistance is available for such appliances through the Medical Rehabilitation Grant.

(vii) Use of radiotherapy facilities where available;

While more and more hospitals are including radiotherapy facilities as a part of their hospital service, there are still many hospitals lacking in these facilities. Furthermore, the distribution of available facilities is not such as to lend itself readily to regional arrangements. For this reason, the federal law requires only that radiotherapy facilities must be insured services where these are available. In fact, the provinces do provide a fairly wide range of such services as deep x-ray therapy, radium, cobalt bomb and other radioactive material, as insured services within the provincial programs.

(viii) Use of physiotherapy facilities where available;

Physiotherapy facilities, like radiotherapy facilities, are more and more being included as intrinsic services in the hospitals. However, many hospitals, particularly the smaller hospitals in the

more remote areas, do not yet possess a physiotherapy department. For this reason, the law requires only that these must be insured services in those places where the physiotherapy facilities are available.

- (ix) Services rendered by persons who receive remuneration therefor from the hospital;

Hospital-employed personnel including such personnel as physiotherapists, occupational therapists, technicians of a variety of sorts, social workers and, of course, the nursing and other staff of the hospital, all come within the compass of the hospital insurance plan. The essential test of eligibility in this regard, is whether the person has a contractual arrangement with the hospital, or in other words, is an employee in that he receives remuneration from the hospital.

Since the insurance program is for hospital and diagnostic care rather than medical care, the service of the physician providing clinical treatment of patients has not hitherto been deemed to be an insured service, although he may receive remuneration for this service from the hospital. This exclusion does not apply to interns or to residents on the staff of the hospital, nor does it apply to doctors who receive remuneration from the hospital as medical administrators or in connection with other non-clinical duties in the hospital.

An exception to the general rule is, of course, to be found in connection with the necessary interpretations of diagnostic procedures described in (iii) above. It should be noted, however, that the remuneration of the physician making these interpretations may not necessarily be included under this particular section.

The question of including the remuneration of physicians employed in chronic hospitals is one which has been raised by the Canadian Hospital Association and which is the subject in at least one province of negotiation between the provincial authority and the provincial medical organization.

- (x) Such other services as are specified in an agreement;

Under this item, provision is made for additional services which a province may wish to include. The type of service which might come under this heading would be a province-wide rehabilitation program, for example, or a province-wide cancer diagnostic and treatment program. The governing factor with regard to these

additional services is, of course, as in the program as a whole, the availability of these services on uniform terms and conditions. Any province-wide program set up under the insurance program must be specified in the agreement.

In essence, the in-patient services which under the federal law are required to be made available in all the provinces participating in the program, are the same with certain minor exceptions. The out-patient services, however, may and do vary considerably from province to province. The details of the provincial out-patient services will be found in paragraph 3 of Part II of this report under the heading Provincial Programs.

5. Period of Entitlement

Insured persons are entitled to receive insured services for as long a period as is medically necessary. No arbitrary limitations may be imposed in connection with length of stay in the hospital other than those imposed by medical necessity. However, where an insured person remains in the hospital beyond the period considered to be medically necessary, he is no longer entitled to insurance coverage. Medical necessity is determined solely by professional medical personnel.

6. Federal Contributions

The federal law provides that the contributions to the provinces shall be paid out of the consolidated revenue fund by the Minister of Finance upon certification by the Minister of National Health and Welfare.

The amount of the federal contributions to the provinces is calculated on the basis of a formula contained in the Act. It has been designed in such a way as to provide greater federal assistance to those provinces in which the per capita cost of hospital care is lower. The formula is also designed to provide for an equitable federal contribution to the provinces, having regard to the considerable variation in the per capita costs between the provinces.

The federal contribution as outlined in the Act, is the aggregate in the year of twenty-five per cent of the per capita cost of in-patient services in Canada, that is the national per capita cost, and twenty-five per cent of the per capita cost of in-patient services in

the province less the amount of authorized charges, multiplied by the average for the year of the number of insured persons in the province.

The effect of this formula is that the high-cost provinces receive a lower percentage of their costs from the federal government than do the low-cost provinces. The inclusion in the formula of the national per capita cost, however, acts as a deterrent to the high-cost provinces, since the more that provincial costs exceed the national costs, the lower the percentage of the federal contribution will be.

Generally speaking, the federal contribution amounts to approximately half of the provincial costs across the country, although in individual provinces it varies.

Since the federal contribution is calculated on an annual basis, provision was made in the legislation for advances on account of contributions, so that the provinces would not be required to wait a full year for reimbursement of the amounts which they are required to pay to hospitals on a continuing basis. In order to expedite the payment of advances and, at the same time, to forestall the likelihood of major financial adjustments after the end of the year, the formula which is used for the calculation of the advance, provides for a small hold-back of the amount due to the province. The formula for the advance, therefore, differs from the formula for the annual contribution in that twenty-two per cent of the per capita cost of in-patient services in Canada is paid, instead of twenty-five per cent provided for in the annual calculation, and the amount of the advance is calculated on the basis of provincial payments, which may or may not be shareable costs as defined in the law.

Administrative procedures were set up at the federal level to ensure the expeditious payment of advances on the federal contribution to the provinces on a monthly basis, with a view to eliminating undue delay but, at the same time, ensuring that the amount of the advances was maintained at levels prescribed by the Hospital Insurance Regulations. A simple procedure was set up whereby, each month, the province submits a monthly statement of payments, signed by the provincial authority and the provincial auditor and certified by the federal Treasury auditor in the province. The Health Insurance section is responsible for calculating the amount of the advance to which the province is entitled; forwards the statement duly certified by the Minister to the Comptroller of the

Treasury who, in turn, forwards the payment for the monthly advance to the province. These payments have been going forward to the provinces with a minimum of delay.

Since the amount of the advance is calculated on a formula described above, which includes the per capita cost of hospital care in Canada, continuing studies are carried out to ensure that this figure maintains continuing accuracy in an area where costs are subject to fluctuations. Changes in the national per capita cost are made, subject to the approval of Treasury Board, at varying intervals as the situation requires. In accordance with the requirements of the Act and the undertakings in the Agreements, the provinces are informed of the basis for any change. The purpose of making periodic adjustments in the national per capita is to maintain realistic advance payments and to eliminate major adjustments in the calculation of the annual federal contribution following the end of the year.

7. Shareable costs

The costs which are shareable by the federal government, are described in the federal legislation. The Act specifically excludes from shareable costs amounts expended on the capital cost of land, buildings or physical plant; for the payment of any capital debt or interest related to capital debt; for the payment of debt incurred prior to the coming into force of the agreement or for the interest related to such prior debt; or any provision for depreciation on the value of land, buildings or physical plant. The term physical plant is defined in the Regulations as excluding furniture and movable equipment or non-movable equipment specially required for use in a hospital. Thus, these items are shareable.

In this connection, it should be noted that most of the capital items which are, by definition, excluded from shareable costs, such as the costs of construction and other matters pertaining to physical plant, are supported by the federal government through the National Health Grants program and particularly through the Hospital Construction grant. The terms of the Hospital Construction grant were broadened very considerably prior to the inauguration of the Hospital Insurance and Diagnostic Services program so that the amounts made available were substantially increased and the items for which these funds were made available were expanded.

Generally speaking, shareable costs are the operating costs of the hospital which have been approved by the provincial authority

and which have been determined in accordance with recognized and generally accepted accounting principles and procedures. The operating costs of a hospital as defined in the Regulations, however, specifically exclude a number of items which, although provided in or in connection with the hospital, are not considered to be an integral part of the operation of the hospital. These include such items as ambulance services and the direct costs related to research. Where a research project is carried out in a hospital, the gross salaries, wages and expenses which have been incurred for medical, surgical and other supplies, and for drugs and equipment, are excluded from the calculation of shareable costs. Such research projects, however, are eligible for financial support under the National Health Grants program. The indirect costs of such research, are not deducted from the operating costs of the hospital for purposes of calculating the shareable amount.

The costs of research which is carried out in a hospital as an integral part of hospital care, are considered to be normal operating costs and are therefore shareable.

As mentioned earlier, insured in-patient services are for accommodation at the standard or public ward level. Direct charges may be made, therefore, to insured persons for accommodation over and above that of the standard ward level. For purposes of sharing, fifty per cent of the income derived by the hospital from such preferred accommodation is shared by the federal government since a portion of the costs is inseparable from the over-all operating costs. For example, the costs of heating, lighting and cleaning cannot be separated from the total costs of such services in the hospital.

Before arriving at the shareable operating costs, there are a number of other deductions made, including the deductions of income derived from persons not entitled to insured services by reason of coverage under other legislation; income from non-residents; income from gift shops, farms and other ancillary operations of the hospital; cash recoveries for meals, laundry, accommodation and other services provided to persons other than patients; and gross earnings not related to the provision of in-patient services in the hospital.

The province is required to approve of the costs of each hospital and these approved costs form the basis of the federal sharing formula.

The procedure which has been established for the reporting by the provinces of financial data relating to shareable costs, has been simplified as much as possible so as to avoid the imposition of undue administrative responsibilities on the provinces, but, at the same time, to adhere minutely to the requirements of the federal law. To achieve this purpose, a series of forms was devised in consultation with the provinces, providing such data as monthly statement of payments; interim statement of costs; final statement of costs for the province as a whole and for individual participating hospitals; and a summary of the data including any necessary reconciliation of total costs with payments by the provincial authority. The data obtained through these forms, provide the basis for the monthly advance payments; interim readjustments; and final calculation of the amount of the contribution to which the province is entitled after the end of the year. These data are also used in adjusting the national per capita cost figure.

8. Participating hospitals

The hospitals in which insured services are provided are hospitals listed in one of the schedules to the agreement with the federal government. The federal legislation does not contain a precise definition of a hospital but it prescribes a hospital to mean a facility providing in-patient and out-patient services, excluding tuberculosis hospitals or sanatoria; hospitals or institutions for the mentally ill; or nursing homes or other institutions the purpose of which is the provision of custodial care. No line of demarcation is drawn between general active treatment, chronic or convalescent hospitals. In order to qualify for listing, a hospital must be capable of providing the prescribed in-patient services and must maintain a policy which ensures the exclusion of custodial care. Listed hospitals must be subject to supervision in accordance with provincial law so as to ensure the maintenance of adequate standards of care. From the inception of the program, considerable emphasis has been placed on the quality of care made available in hospitals participating in the program.

In-patient services are provided in listed hospitals as insured services regardless of the individual diagnosis of the insured person. Thus, for example, the services provided in the psychiatric ward of a listed general hospital are insured services despite the fact that institutions for the mentally ill as such are excluded from the federal law.

For purposes of the agreement, hospitals are designated by certain categories: budget review hospitals, which comprise the bulk of the listed hospitals since these include the public hospitals in the provinces; contract hospitals, which are defined in the Regulations as private or industrial hospitals with which a province has contracted for the provision of insured services; and federal hospitals, which are hospitals owned or operated by the federal government including those administered by the Departments of Veterans Affairs, National Defence, and the Directorate of Indian and Northern Health Services of the Department of National Health and Welfare.

For the most part, the budget review hospitals are reimbursed on the basis of approved budgets and approved expenditures. The approval in both cases is by the provincial government.

Contract hospitals are generally reimbursed at agreed rates having regard to costs, while the amounts payable by a province to federal hospitals are determined on the basis of amounts which would have been paid by the province for similar services in other comparable hospitals in the province.

During the initial period of the program a number of difficulties arose in connection with the availability of adequate facilities particularly in those provinces which included from the beginning a long-term or chronic care program. In order to assist these provinces during an interim period pending the construction of adequate facilities, it was agreed that certain nursing homes which were considered to meet standards set out in provincial legislation, might be listed as hospitals. A primary consideration in this regard has been that the services in the nursing home include the in-patient services which are required under the law to be provided and that custodial care is excluded. Where such arrangements have been made, they are listed on an interim basis and subject to continuing review.

Another temporary arrangement designed to make available additional facilities for chronic care, has been through the listing of unused portions of tuberculosis sanatoria. With the rapid decrease in tuberculosis hospitalization, more and more beds in these institutions are being made available for other types of care. A condition of such a listing is that the portion of the institution designed to provide insured services must be separated both as regards staff and financing, from the institution as a whole.

Through these temporary measures, considerable facilities have been made available for chronic and long-term care.

With regard to statistical data, for some years, hospitals in Canada have been making annual reports to the Dominion Bureau of Statistics under the authority of the Statistics Act. This report has now been expanded in such a way as to continue to provide the Dominion Bureau of Statistics with the information required by them and, at the same time, to provide the Department of National Health and Welfare with essential statistical and financial data related to hospitals, in the administration of the Hospital Insurance and Diagnostic Services Act. The Dominion Bureau of Statistics and the Department have co-operated in devising this Annual Return which replaces the former D.B.S. Return and which is now submitted both to the Bureau and to Health Insurance.

The statistical data for the calendar year 1959 will be available within a short time and it is anticipated that the valuable information extracted from the Annual Return of Hospitals will be made available in the next Report to Parliament.

9. Federal assistance to ensure high standards

The federal government provides the provinces with certain types of assistance, in addition to the contributions for which provision is made under the Act, designed to maintain a high standard of hospital care.

Although the Hospital Insurance and Diagnostic Services program involves the payment of substantial sums of money, it has been a basic principle of the administering authorities to ensure the provision of a quality health service. For this reason, considerable emphasis has been placed on the need for maintaining a high quality of care at the hospital level itself, and for assisting the provinces in their responsibility of fulfilling this objective. For this purpose, the broad range of advisory and consultant services maintained by the Department of National Health and Welfare, has been available to Health Insurance and, on request, to the provinces in providing consultant services in a variety of fields. The consultant services are also provided on request by the consultant staff of Health Insurance.

From the outset of the program, the provinces were assured that the funds which have been available for some years under the National Health Grants program would continue to be available for projects designed to train and employ personnel whose duties were geared to the improvement of standards. These funds are not, of course, available for costs properly related to provincial administration.

They are, however, available for technical purposes which will improve and enhance the quality of the provincial service.

10. Methods of federal and provincial co-operation

A tradition of close co-operation between the federal and provincial governments in matters relating to the Hospital Insurance and Diagnostic Services program, was initially established prior to the commencement of the joint program. During the early stages of the program, federal-provincial technical conferences on hospital insurance were convened in Ottawa. These conferences were attended by representatives of all the provincial governments, including governments not yet participating in the joint program. Between December 1957 and April 1959, four technical conferences were held, and a number of working parties appointed by the conferences carried out a considerable amount of preparatory work particularly with regard to financial forms and statistical returns. Discussions were held at the conferences on a wide variety of topics relating to matters of mutual concern. The keen interest of the provinces in these conferences was reflected in the expanding attendance at the meetings.

While the large attendance at the technical conferences reflected the active interest of the provinces in joint consultation, it also precluded the type of discussion which may only be achieved in a body of considerably more modest dimensions. It was recognized, however, that the device for federal-provincial exchange of views was one which should be maintained to the mutual benefit of all concerned. For this reason, the Minister of National Health and Welfare, with the concurrence of his Cabinet colleagues and the agreement of the provincial Ministers, established a permanent Advisory Committee on Hospital Insurance and Diagnostic Services.

The provinces were invited to name not more than two representatives each as members of the Advisory Committee, whose chairman is the Director of Health Services and co-chairman is the Principal Medical Officer, Health Insurance. The Deputy Minister of Health is an ex-officio member while other members of the Committee are the chairmen of the Sub-committees.

The first meeting of the Advisory Committee was held in Ottawa on November 5th and 6th, 1959 and the second meeting took place on August 24th and 25th, 1960. The Committee had set up three sub-committees to deal with specific subjects and the provinces were invited to name to the sub-committees persons of particular technical competence in the Sub-committee's field of work.

The sub-committees which were appointed were: Sub-committee on Quality of Care, Research and Statistics; Sub-committee on Finance and Accounting; and Sub-committee on Residence and Uniformity of Benefits.

The Sub-committee on Quality of Care, Research and Statistics, met in Ottawa on November 2nd and 3rd, 1959 and on August 22nd and 23rd, 1960. In order to expedite its work with regard to specific problems, the Sub-committee set up a working party charged with the task of drawing up standard definitions and standard tabulations for all provinces to use so that provincial data would be readily comparable on a national basis. This working party has made very substantial progress in its work in achieving the goal set for it. The Sub-committee also recommended, and the Advisory Committee approved, the establishment of a working party to set up on a national basis, guides in connection with standards of care in hospitals.

The Sub-committee on Finance and Accounting met in Ottawa on June 6 and 7, 1960 and discussed a wide variety of financial and accounting problems. A working party was set up in an effort to work out a formula in connection with renovations and maintenance costs.

The Sub-committee on Residence and Uniformity of Benefits met in Ottawa on April 19th, 1959 and June 8th and 9th, 1960, and dealt with a large number of problems relating particularly to matters of concern to a number of provinces.

11. Methods of federal administration

The administration of the Hospital Insurance and Diagnostic Services program at the federal level is the responsibility of the Directorate of Health Services of the Department of National Health and Welfare and is carried out by the Health Insurance section. This section is headed by a Principal Medical Officer and is staffed by a medical officer who is Assistant to the Principal Medical Officer, Consultants in Hospital Accounting and in Hospital Administration, and an Administrative Officer.

In order to facilitate efficient administration, utilizing only this small staff, a number of specially qualified officers in other divisions of the Department and other departments of the federal government, work in close collaboration with Health Insurance on what might best be described as a 'team' basis. In the main, the team consists of officers of the Research and Statistics Division and the Legal

Division of the Department; officers of the Pensions and Social Insurance Section of Treasury Board, Department of Finance; and representatives of the Comptroller of the Treasury. Insofar as certain special aspects of the program are concerned, close working relationships have been established with additional federal departments. For example, in the field of hospital statistics, Health Insurance works closely with the Dominion Bureau of Statistics and the Research and Statistics Division of the Department of National Health and Welfare. Needless to say, problems relating to veterans are dealt with in collaboration with the Department of Veterans Affairs. Problems relating to the Indian population necessitate collaboration with the Directorate of Indian and Northern Health Services and with the Department of Citizenship and Immigration. Where matters pertaining to the Northwest Territories are concerned, collaboration with the Department of Northern Affairs and National Resources is maintained. The Department of National Defence also has an interest in certain areas of the program and, when these are concerned, liaison is maintained with that Department. Problems relating to immigrants and sick mariners bring the Quarantine, Immigration Medical and Sick Mariners Services of the Department into the picture.

II. PROVINCIAL PROGRAMS

1. Commencement of provincial programs

The first five provinces to commence the operation of provincial programs on July 1, 1958, in accordance with agreements entered into with the federal government under the Hospital Insurance and Diagnostic Services Act, were British Columbia, Alberta, Saskatchewan, Manitoba and Newfoundland. On January 1, 1959, Ontario and Nova Scotia inaugurated programs in those provinces, followed by New Brunswick on July 1, and Prince Edward Island on October 1, 1959. During 1960, programs were commenced on April 1 in the Northwest Territories and July 1 in the Yukon. By the end of the year, the Quebec plan was in readiness to commence operation on January 1, 1961.

2. Provincial Authorities

The provincial authorities responsible for the administration of the provincial programs, vary from province to province. In some provinces, the program is administered by the Department of Health, as a direct responsibility of the Deputy Minister of Health.

This pattern has been adopted in the provinces of Newfoundland and Saskatchewan; a similar pattern will apply in Quebec. In some provinces, the program is also administered by the Department of Health but under the direct responsibility of an officer other than the Deputy Minister of Health. For example, in British Columbia, the Deputy Minister of Hospital Insurance is the responsible officer and reports directly to the Minister of Health. In Manitoba, a Commissioner of Hospitalization has been appointed in the Department of Health and Public Welfare, and this officer is responsible directly to the Minister of Health and Public Welfare. In Alberta, the Minister of Health is the provincial authority, executive responsibilities being assigned to the Director of the Hospitals Division.

In four provinces, Commissions have been set up, charged with the responsibility of administering the Hospital Insurance and Diagnostic Services program. In all instances, the responsible officer in the Commission reports directly to the Minister of Health. This pattern has been adopted in the Provinces of Ontario; New Brunswick; Nova Scotia and Prince Edward Island. A board, with powers similar to those of the Commissions, has been established for the Northwest Territories. The provincial authority in the Yukon is the Territorial Commissioner who may appoint an administrator to carry out the necessary functions.

A list of the provincial authorities will be found in Appendix A.

3. Insured services

All of the provinces provide the basic in-patient services required by the Hospital Insurance and Diagnostic Services Act to be provided. As mentioned earlier, admission chest x-rays and syphilis serology are made available without charge to insured persons although these services are not included as insured services in some of the provincial programs.

Since the provision of out-patient services is optional, there is considerable variation between the provinces in the area of out-patient services.

Alberta does not provide any out-patient services under the joint federal-provincial program, although the province has provided out-patient services limited to recipients of public assistance since April 1, 1959. This program may not be included in the Agreement

under the Hospital Insurance and Diagnostic Services Act because it fails to meet the requirements of the law with regard to uniform availability on equal terms and conditions to all residents of the province. Quebec too does not plan to include out-patient services at the outset.

In the agreement with British Columbia, no out-patient services are listed, although emergency services and minor surgical procedures are included in the provincial program on payment of a \$2 authorized charge.

The common feature of out-patient services provided in a number of provinces, is the provision of a fairly broad range of services in the event of an accident. In Ontario, they are provided within a period of twenty-four hours after an accident, while this period may be extended in Manitoba, the Northwest Territories and the Yukon. The twenty-four-hour period is also prescribed in Saskatchewan and by an amendment made in the law, coverage for subsequent changes of casts or dressings or removal of casts or sutures required as a consequence of an injury treated in the hospital or in the out-patient department was included. In Nova Scotia, emergency services are provided within forty-eight hours of an accident and in New Brunswick, no specified period of time has been prescribed but an amendment was made to include follow-up care.

In Ontario, the Northwest Territories and the Yukon, out-patient services are only provided in the event of an emergency. The provinces of Saskatchewan, Manitoba, New Brunswick, Nova Scotia, Prince Edward Island and Newfoundland all provide additional out-patient services.

In Saskatchewan, out-patient services include the pathological examination of tissue; cancer services; and the examination of and reporting on clinical and diagnostic specimens, by the provincial laboratories.

In Manitoba, minor surgical procedures, as designated, and electro-shock therapy are provided as insured out-patient services. The minor surgical procedures which have been designated so far include the repair of wounds; the application and removal of casts; surgical dressings requiring special aseptic techniques; and the reduction of dislocations. The removal of small tumors and cysts and the removal of foreign bodies from the eye, ear or other accessible cavities are also included. Biopsies, catheterization, and lumbar punctures are insured services, as are blood transfusions.

In New Brunswick, diagnostic and treatment procedures, as authorized; and the services of the provincial laboratory, as specified; as well as physiotherapy facilities where available, when used for medical rehabilitation; are all insured out-patient services.

Nova Scotia provides a wide range of out-patient services in addition to the emergency services in accident cases mentioned above. The services of the tumor clinic and laboratory tests from time to time specified by the Commission, together with necessary interpretations, are insured. The specified tests include haematology, biochemistry, bacteriology, histopathology, virology and serology. Encephalographic examinations and interpretations are included, as are diagnostic procedures involving the use of radioactive isotopes. During the course of the year under review, the province included as insured out-patient services all medically necessary diagnostic radiological examinations. In addition, treatment facilities where available are insured for radiotherapy and physiotherapy. Minor and surgical procedures and the provision of blood including blood fractions are also insured out-patient services.

Prince Edward Island provides laboratory and radiological procedures, as specified, including the use of radioactive isotopes; drugs, biologicals and related preparations for emergency diagnosis and treatment; and all of the other services prescribed as in-patient services in the federal Act.

In Newfoundland, selected diagnostic and treatment procedures are provided as insured out-patient services.

4. Methods of Financing Provincial Share of Costs

(i) Charges not related to Specific Services

Since the provinces were free to devise their own methods for financing the provincial share of costs, a variety of methods of financing has emerged. Five provinces initially used a premium method, but one of these subsequently switched to general revenue; one province levied a hospital tax while another levies a property tax. Other provinces finance their share of costs out of general revenue and, in some instances, a combination of methods is used.

The premium method is used in Saskatchewan, Manitoba, Ontario and Prince Edward Island. It had been used in New Brunswick until, by Order in Council, advance premiums were no longer required to be collected from July 1960, and the premium was to be abolished from January 1st, 1961.

The annual premium, or hospitalization tax as it is called, in Saskatchewan was \$17.50 for single persons and \$35.00 for families, but will be increased to \$24 and \$48 respectively from January 1, 1961. The funds derived from the hospitalization tax are augmented by general revenue funds.

The Manitoba monthly premium which was \$2.05 for single persons and \$4.10 for families was increased to \$3.00 and \$6.00 respectively in June 1960. A compulsory payroll deduction is applied for employed groups of three or more persons. Provision is also made to exempt from this group certain categories of persons for such reasons as temporary or part-time employment.

The Ontario monthly premium of \$2.10 for single persons and \$4.20 for families, entitles insured persons in Ontario to insured services and, in addition, to services over and above those included in the Agreement under the Hospital Insurance and Diagnostic Services Act. The provincial program in that province includes insured services in mental hospitals and tuberculosis sanatoria. There is a compulsory payroll deduction clause in the Ontario law in relation to establishments of fifteen or more employees including the employer. Unlike the majority of provinces, this category of residents is the only category with respect to whom insurance coverage is compulsory in the province.

The monthly premium which had been levied in New Brunswick was \$2.10 for single persons and \$4.20 for families. Employers of five or more employees were required to make a payroll deduction and to remit the premium payments to the Commission. Exceptions were permitted in connection with such circumstances as partial or temporary employment. With the cancellation of the premium method, with effect from January 1st, 1961, the New Brunswick share of costs will be derived from the general revenues of the province.

In Prince Edward Island, the monthly premium is \$2.00 for single persons and \$4.00 for families. All members of employee groups of three or more, are compulsorily covered, with the usual exceptions, and a payroll deduction method of collection of premiums is prescribed. The province may also designate co-operatives and other groups who, when so designated, are compulsorily covered under the provincial plan. Enrolment is voluntary for residents of the province not coming within these categories.

In all the premium provinces, (with the exception of New Brunswick while it was on the premium method), reduced premium

rates are levied with respect to the families of armed services personnel and members of the Royal Canadian Mounted Police.

British Columbia finances the provincial share of costs out of the general revenue of the province. Part of a provincial sales tax is paid into the general revenue fund for hospital insurance. A similar method of financing is planned in Quebec. Newfoundland, the Northwest Territories, and the Yukon Territory also finance their share of costs out of general revenue. Both British Columbia and the Northwest Territories supplement this source of revenue by the levy of authorized charges discussed below.

When the Hospital Insurance and Diagnostic Services program came into operation in Nova Scotia, a three per cent hospital tax was also inaugurated and the funds derived from this sales tax are used to finance the provincial share of costs.

Alberta raises a portion of its share of costs from a mill rate levied on property as well as levying an authorized charge.

(ii) Authorized Charges

Only three provinces have included in their Agreement, provisions for levying charges directly to patients for insured services. These deterrent or co-insurance charges are related to in-patient services in British Columbia, where a charge of \$1.00 per day of hospital care is imposed; in Alberta, where the charge varies between \$1.50 and \$2.00 per day (\$1.00 per day for a newborn), depending upon the category of the hospital; and in the Northwest Territories where a charge of \$1.50 per day of hospital care is imposed. The charge of \$2.00 referred to above in connection with the out-patient services in British Columbia, is not a part of the joint federal-provincial program.

5. Recipients of Public Assistance

With the exception of Newfoundland, Nova Scotia and the Yukon Territory, where they are automatically covered, as well as Quebec and New Brunswick, where they will be automatically covered in 1961, recipients of public assistance are subject to special arrangements which have been made in the provinces to cover payments of premiums or authorized charges on their behalf.

In British Columbia and Alberta, the authorized charges levied on insured persons in connection with hospital care, are paid by the provincial welfare authorities, and in the Northwest Territories, they are paid either by the Territorial Government or the municipality. In Saskatchewan, recipients of public assistance become insured persons by virtue of the payment of the premium on their behalf by the relevant Department of Welfare. In Manitoba and Ontario, recipients of public assistance are entitled to insured services, the Ontario Department of Health paying a lump sum to the Commission annually in lieu of premiums. In Prince Edward Island, these recipients are entitled to a special means test to establish eligibility for payment of the premium on their behalf by the welfare authorities. A similar provision had applied in New Brunswick until the termination of the premium method of payment.

Insofar as recipients of assistance from the federal government are concerned, such as persons in receipt of War Veterans allowances, the federal government pays to the provincial authorities the relevant premium or authorized charge on their behalf. Similarly, the federal government pays the premium or authorized charge on behalf of indigent reserve Indians or indigent Eskimos.

6. Waiting Periods for Benefits

As mentioned earlier, waiting periods for benefits of varying lengths have been prescribed, but no province prescribes a longer waiting period than three months. However, not all of the provinces have imposed the full three-month waiting period. In fact, two of the provinces do not prescribe any waiting period for benefits, while one province has limited the waiting period to one month.

A three-month waiting period for benefits is prescribed by the legislation in British Columbia; Saskatchewan; Ontario; New Brunswick; Nova Scotia; Prince Edward Island; Northwest Territories; and the Yukon Territory. Quebec legislation makes provision for a similar waiting period. In Manitoba, a waiting period of one month is prescribed, while Alberta and Newfoundland do not impose any waiting periods for benefits, except for new residents having entitlement from their home province.

7. Insurance Entitlement Outside of the Province

There are two circumstances in which provinces give entitlement to insured services when the resident is not present in the

province in which he is covered by the provincial plan. The first instance is when, maintaining his residence in the home province, he requires hospital services outside of the province. The second circumstance is when a resident changes his place of residence from his home province to another participating province, particularly where a waiting period for benefits is required by the law of the new province. For present purposes, the first circumstance will be described as "out-of-province benefits" and the second will be described as "benefits on change of residence".

(i) Out-of-Province Benefits

All of the provinces make some provision for the payment of insured in-patient services for residents of the provinces receiving care in hospitals situated outside of the home province. Since the federal law does not prescribe specific limitations or basic minima in this regard, the provisions of the provincial laws vary from province to province. The most common circumstance in which out-of-province benefits are paid, is, of course, in the case of an emergency. In other circumstances, some provinces require the prior approval of the provincial authority. Some provinces set a ceiling on the length of hospitalization which may be recognized under the provincial hospital insurance program. In all of the provinces, payments may be made directly to the hospitals concerned or by reimbursement to the insured person on presentation of a receipted bill.

Under the British Columbia program, benefits are payable within a period of three months' absence from the province in the event of emergency or in cases in which the prior approval has been obtained from the Deputy Minister of Hospital Insurance. The British Columbia plan pays the hospitals in participating provinces, at the per diem rates approved by the provincial authority in that province, less the amount of authorized charges levied in British Columbia (\$1.00 per day). In non-participating provinces, reimbursement may be computed by the Deputy Minister of Hospital Insurance at the rates charged by the hospital or \$12.00 a day (\$4.00 for newborn), whichever is less.

Alberta pays out-of-province benefits in cases of emergency; upon referral; or when the hospital which is situated outside of the province, is more accessible to the Alberta resident than a hospital within the province. The rates at which Alberta pays the hospital (or, on receipt of evidence of payment, reimburses the insured person), may not exceed the rates payable for similar services in Alberta (less the amount of authorized charges) in an amount not to exceed \$13.00 daily.

Saskatchewan originally paid out-of-province benefits for a maximum period of ninety-two days in Canada, and sixty days annually outside of Canada, but these time restrictions were deleted by statutory amendment during 1960. The rates payable in participating provinces are the per diem rates fixed by the provincial authority in the participating province. In non-participating provinces and outside of Canada, the average maximum amount payable is \$15.00 daily (\$2.00 for newborn).

Manitoba pays out-of-province benefits in the event of emergency; with the prior approval of the Commissioner when adequate care is not available in the province; or when a resident has been supplied with an out-of-province certificate. The amount payable by Manitoba may not exceed the amount which would have been payable for similar services in Manitoba except that, in participating provinces, the amount may be the per diem rate fixed by the provincial authority in that province. The Manitoba law also empowers the Commissioner to enter into agreements with individual hospitals situated outside of Manitoba.

Ontario pays for insured services provided outside of the province by hospitals approved by the Ontario Hospital Services Commission. The amount which is payable to such hospitals, may not exceed a maximum daily charge fixed by the Commission.

Quebec legislation provides for the payment of out-of-province benefits in approved hospitals. The rates payable are those established by the province in participating provinces or, in hospitals outside of Canada, the rate charged by the hospital or on the basis of \$15 a day, whichever is less.

In New Brunswick, out-of-province benefits are provided in the event of emergency or, when adequate care is not available in the province with the prior approval of the Commission (Department of Health, after April 1, 1961). An out-of-province certificate also entitles a resident to benefits. New Brunswick pays the appropriate rate established for a participating hospital in a participating province. But the highest per diem rate which is payable may not exceed ten per cent over and above the amount which would have been payable in a hospital in the province. However, the Commission may enter into an agreement with a hospital outside of the province for the provision of insured services, to residents of New Brunswick.

Out-of-province benefits are paid by Nova Scotia for not more than three months in a period of twelve consecutive months. Benefits are payable in case of emergency or with the prior approval of the

Commission. The amount which is payable, may not exceed the per diem rate set by the provincial authority, in a participating province. Other than in participating provinces, the amount payable is calculated on the basis of an average daily charge of \$14.00 (\$5.00 for newborn), or the all-inclusive daily rate in the hospital, whichever is less. Out-of-province benefits are not paid by Nova Scotia for out-patient services.

In Prince Edward Island as well, out-of-province benefits are payable for up to three months in a period of twelve consecutive months. They are paid in cases of emergency or with the prior approval of the Commission. In participating provinces, the amount payable may not exceed the per diem rate set by the provincial authority in that province for the hospital concerned. In hospitals outside of participating provinces, the amount payable may not exceed an amount calculated on the basis of an average daily rate of \$14.00 (\$5.00 for a newborn) or the all-inclusive daily rate of the hospital, whichever is less. In cases where the prior approval of the Commission has been obtained for hospital care elsewhere than in a participating province, the amount payable is calculated on the basis of the standard ward accommodation rate in the hospital concerned. Prince Edward Island does not cover out-patient services received out of the province.

Newfoundland also provides out-of-province benefits in cases of emergency or with the prior approval of the Minister. The amount payable in participating provinces is that established by the provincial authority in that province for the hospital concerned. Outside of participating provinces, the amount payable may not exceed the amount which would have been paid in a comparable hospital in Newfoundland.

The Northwest Territories and the Yukon Territory both provide out-of-province benefits in approved hospitals during a period of twelve months continuous absence from the Territories. The rate which is payable by the Yukon is the established rate for the hospital in a participating province or elsewhere, a rate determined by the administrator, which may not exceed that payable for an approved hospital. The rate payable by the Northwest Territories is the established rate in participating provinces less the amount of the authorized charge (\$1.50 per diem) or elsewhere, a rate determined by the Board which may not exceed the maximum rate established for approved hospitals, less the authorized charge.

(ii) Benefits on Change of Residence

All the participating provinces provide coverage for a period up to three months, generally exclusive of travelling time, for residents who move to another participating province, in the event that a waiting period for benefits is imposed in the new province. The purpose of this provision in the provincial laws, is to ensure that no insured resident of one participating province, will suffer any break in coverage on change of residence to another participating province.

III. THE NUMBER OF PERSONS COVERED

The number of insured persons in participating provinces as reported in the last Report to Parliament was 11,227,511. The number of persons covered at the end of the fiscal year under review was 11,984,302, an increase of 756,791.

In presenting data related to the number of persons covered by the provincial programs, regard must be had to the varying methods used by the provinces for the purpose of calculating the number of insured persons. In provinces which levy a premium, insured persons are registered and identification certificates are provided. However, the methods of registration in some provinces consist of the registration of single persons on the one hand, and family heads on the other. Thus, in some of these premium provinces, it is possible to give the precise number of single subscribers and of family subscribers; the number of persons covered by the family subscriber, however, is not known since the family rate applies wherever a family head has one or more dependants.

In order to make a more precise count with regard to the family groups in premium provinces where no head count is made, therefore, it has been necessary to calculate the number of dependants in the average family unit in the province. In this way, it is possible to estimate the number of persons in the province eligible for and entitled to insured services at the end of each month, an estimation which is required to be made in connection with the amount of the federal contribution and contained in the formula set out in the Act. The average family unit in the provinces concerned is calculated by the Dominion Statistician.

In provinces where no premiums are levied and where the provincial share of costs is paid out of general revenue, sales or property tax, no individual registration of insured persons is

required, and coverage is universal. Insofar as these provinces are concerned, provision was made in the Agreements for calculation on the basis of a population estimate for a given date in the year (June 1) as determined by the Dominion Statistician.

The Hospital Insurance Regulations define population for the purposes of the Hospital Insurance and Diagnostic Services legislation, to mean the population of Canada or of the province, as certified by the Dominion Statistician, and, calculated for a calendar year in which a census was taken, as the population of Canada or of the province as ascertained by the census; for other than a census year, the population of Canada or of the province on the 1st day of June in that year according to published original intercensal estimates of the Dominion Statistician. In both instances the number of the members of the regular forces, members of the Royal Canadian Mounted Police and persons serving terms of imprisonment in a federal penitentiary are deducted so as to provide a net population figure for the purpose of calculating the eligible population.

During the fiscal year under review, the Dominion Statistician supplied net population estimates for June 1, 1959 based on the original published intercensal estimate, and for June 1, 1960 based on advance estimates.

The net population estimate for June 1, 1958 based on the original published intercensal estimate, as shown in the report for 1958-59, was used in the fiscal year under review in connection with the calculation of the final national per capita cost for 1958 and the average number of insured persons for that year in the provinces of Newfoundland, Alberta and British Columbia.

The estimated net population for June 1, 1959, based on the advance estimates, was made available in January of that year and was used for the purposes of estimating the national per capita cost for 1959 and for calculating the advance payments to non-premium provinces for the months of April and May, pending the availability of the June 1, 1959 estimate based on the original published intercensal estimate.

This estimate was made available in June and was used for the purpose of calculating the amount of advances to non-premium provinces for the months of June to December 1959.

The estimated net population for June 1, 1960 based on an advance estimate, was made available in January of that year and was used for the purpose of calculating the estimated national per capita cost for 1960 and the amount of the advances to non-premium provinces for January to March 1960.

Table 1 shows the net population estimates by province as certified by the Dominion Statistician which were used for calculating advances to non-premium provinces during the course of the fiscal year under review. The net population of Canada increased from 16,918,000 on June 1, 1958, to 17,310,000 on June 1, 1959, a total increase of 392,000, and a percentage increase of 2.3%. It will be noted that the difference for June 1, 1959 between the number based on an advance estimate and the number based on the original published intercensal estimate, is very small.

The estimate of net population supplied by the Dominion Statistician was used for purposes of calculating advance payments in the provinces of Newfoundland, Nova Scotia, Alberta and British Columbia. The other provinces participating in the year under review, Prince Edward Island, New Brunswick, Ontario, Manitoba and Saskatchewan used a system of registration in connection with the levy of premiums.

The provincial registration records in premium provinces were used to estimate the number of insured persons. In Saskatchewan, Manitoba, Prince Edward Island and New Brunswick the dependants as well as the family heads, are registered so that an actual count of the number of insured persons is available from the registration records. In Ontario, on the other hand, dependants are not registered other than through the registration of the family head. In order to calculate the number of persons in the family group in Ontario, therefore, it has been necessary to obtain the average number of dependants in the Ontario family. This estimate was made by the Dominion Statistician, and for the 1959 calendar year the average number of dependants in Ontario was calculated to be 2.44 persons.

Table 2 shows the number of insured persons on March 31, 1960 as used for making advance payments. It also shows the percentage of the number of insured persons on that date in each province, expressed in relation to the advance estimate of net population as of June 1st, 1960. As the advance estimate at June 1st, 1960, was used to calculate advances for March, 1960, in non-premium provinces, the relationship in these provinces is 100%. Net population estimates at March 31st are not available, but the difference between June 1st and March 31st would not change the percentages by any significant amount.

It will be noted that 67.6% of the total population of Canada were insured persons at March 31st, 1960 as compared with 28.6% for the previous year.

TABLE 1

NET POPULATION CERTIFIED BY THE DOMINION STATISTICIAN,
BY PROVINCE,
AS USED FOR CALCULATION OF PER CAPITA COSTS AND FOR
MAKING ADVANCE PAYMENTS TO NON-PREMIUM PROVINCES

PROVINCE	JUNE 1, 1959		JUNE 1, 1960
	BASED ON ADVANCE ESTIMATE (1)	BASED ON ORIGINAL PUBLISHED INTERCENSAL ESTIMATE (2)	BASED ON ADVANCE ESTIMATE (3)
Newfoundland (4)	446,000	448,000	456,000
Prince Edward Island	100,000	101,000	103,000
Nova Scotia (4)	699,000	696,000	703,000
New Brunswick	581,000	583,000	592,000
Quebec	4,988,000	4,980,000	5,108,000
Ontario	5,894,000	5,908,000	6,063,000
Manitoba	871,000	874,000	888,000
Saskatchewan	899,000	899,000	908,000
Alberta (4)	1,231,000	1,232,000	1,274,000
British Columbia (4)	1,561,000	1,556,000	1,600,000
Yukon	13,000	13,000	13,000
Northwest Territories	20,000	20,000	20,000
CANADA	17,303,000	17,310,000	17,728,000

- (1) Used for calculating estimated national per capita for 1959.
Used for calculation of advances to Non-premium provinces for the months of April and May 1959.
- (2) Used for calculation of advances to Non-premium provinces for the months of June to December, 1959.
- (3) Used for calculating estimated national per capita for 1960.
Used for calculation of advances to Non-premium provinces for the months of January to March, 1960.
- (4) Non-premium provinces which participated during 1959-60 fiscal year.

It will be recalled that a part of the formula relating to the payments of contributions is the average for the year of the number of persons in the province who were eligible for and entitled to insured services at the end of each month in that year. For purposes of advances the estimated number of insured persons in the province at the end of the month determined in accordance with the method described in the scheme for administration of the provincial law is used.

IV. FEDERAL PAYMENTS TO THE PROVINCES

It has already been noted that the federal contribution to a province is calculated on the basis of shareable costs during the course of a calendar year. When the first Annual Report on the operation of the agreements was presented to Parliament last year, it was mentioned that the calculation of the final contribution for the calendar year 1958 was in the process of completion. During the fiscal year under review the final contribution for 1958 was made, with the exception noted below. In addition, advance payments on a monthly basis were made to provinces participating during the fiscal year 1959-60. The remainder of this Report, therefore, concerns the final payments for the calendar year 1958 and the advance payments to participating provinces during the fiscal year 1959-60.

1. Per Capita Cost of In-patient Services in Canada

Both in the formula relating to the final contribution and in that relating to the amount of the advance, it will be noted that an essential component is the per capita cost of in-patient services in Canada. The per capita cost of providing in-patient services across the country is not a simple one to calculate. It must be based on the costs in all provinces, including the non-participating provinces. Insofar as the participating provinces are concerned, reporting procedures have been devised which provide a considerable amount of data which are used in making the necessary calculations, although these data in themselves do not suffice. In non-participating provinces, reliance must be placed on the information supplied by individual hospitals. Obviously the problems associated with the calculation of the national per capita costs, were considerably more difficult in the initial year of the operation of the hospital insurance program than may be anticipated in subsequent years when most of the provinces are participating.

TABLE 2

NUMBER OF INSURED PERSONS ON MARCH 31st, 1960
BY PROVINCE
AS REPORTED FOR PURPOSES OF ADVANCE PAYMENTS

PROVINCE	NUMBER OF INSURED PERSONS MARCH 31, 1960	ADVANCE ESTIMATE OF NET POPULATION JUNE 1, 1960	PER- CENTAGE OF PERSONS INSURED
Newfoundland	456,000	456,000	100.0%
Prince Edward Island	87,787	103,000	85.2%
Nova Scotia	703,000	703,000	100.0%
New Brunswick	507,361	592,000	85.7%
Quebec	NIL	5,108,000	0.0%
Ontario	5,588,024	6,063,000	92.2%
Manitoba	882,365	888,000	99.4%
Saskatchewan	885,765	908,000	97.6%
Alberta	1,274,000	1,274,000	100.0%
British Columbia	1,600,000	1,600,000	100.0%
Yukon	NIL	13,000	0.0%
Northwest Territories	NIL	20,000	0.0%
CANADA	11,984,302	17,728,000	67.6%

The national per capita cost, having been calculated by the Department, is subject to the approval of Treasury Board. Periodic adjustments are made in the national per capita as indicated on the basis of information which is under continual study in the Department.

2. Advance Payments

The amount of the advance payments is based on a formula contained in the Hospital Insurance Regulations in accordance with which the federal government advances monthly to the provinces for in-patient services, an amount calculated on the basis of twenty-five per cent of provincial payments to hospitals during the month for insured in-patient services; plus twenty-two per cent of the per capita cost of in-patient services in Canada multiplied by one-twelfth of the estimated number of insured persons in the province for the relevant month. For calculating the amount of the advance for out-patient services, the Regulations provide the simple device of applying to the monthly payments for out-patient services, a percentage represented by the percentage of the federal advance to provincial payments for in-patient services for the month. In determining provincial payments, the amount recovered by the province in third party liability cases is deducted.

It should be noted that in the formula for advance payments, there is built-in a calculation for hold-back of federal funds to which the province is entitled under the formula for the final contribution through the use of the percentage of 22% instead of 25% of the national per capita. The purpose of this hold-back is to ensure, as far as possible, a minimum of financial re-adjustments after the end of the year.

The procedure set up for the payment of advances was designed to facilitate prompt payment to the provinces. In order to achieve this end, the full co-operation of the federal treasury auditors was obtained both at the federal level and in the provinces. A simple form has been devised on which is shown for each month, amounts paid by the province for insured services to insured residents. The estimated number of insured residents at the end of the month is also shown. This form, signed by the provincial authority and the provincial auditor, is certified by the federal Treasury auditor in the province and the completed form is then sent to Ottawa. The calculation of the advance is made in the Department and, on certification by the Minister of

National Health and Welfare, the monthly advance is transmitted by the Comptroller of the Treasury to the province. The lapse of time in Ottawa between the receipt of this form from the province and the dispatch of the payment to the provinces, has been between two and fourteen days with an average of seven days. Payments have been going forward regularly without major difficulty.

Details concerning the amounts of the advance payments will be found in Table 3, where the figures are shown by provinces. It will be noted that during the fiscal year under review an amount of nearly \$150 million was paid in the form of monthly advances to participating provinces. It must be recalled, however, that two of the nine provinces which were participating in the program at the end of the fiscal year, had only participated during a portion of that year.

TABLE 3
ADVANCES PAID TO PARTICIPATING PROVINCES,
BY PROVINCE,
1959-60 FISCAL YEAR

PROVINCE	ADVANCE PAYMENTS		
	IN-PATIENT	OUT-PATIENT	TOTAL
Newfoundland	\$ 4,362,704.51	\$ 198,894.70	\$ 4,561,599.21
Prince Edward Island	422,666.36	24,671.91	447,338.27
Nova Scotia	7,838,000.15	324,540.63	8,162,540.78
New Brunswick	4,512,530.60	62,844.30	4,575,374.90
Ontario	71,347,620.94	545,212.72	71,892,833.66
Manitoba	11,226,111.17	98,355.18	11,324,466.35
Saskatchewan	12,799,074.36	353,071.01	13,152,145.37
Alberta	15,020,427.18	NIL	15,020,427.18
British Columbia	19,877,183.50	NIL	19,877,183.50
TOTALS	\$147,406,318.77	\$1,607,590.45	\$149,013,909.22

3. Final Contributions

The amounts of the contributions payable to the provinces under the agreements are calculated on the basis of a formula in the Hospital Insurance and Diagnostic Services Act which differs from the formula for the payment of advances contained in the Regulations, in that the final contribution is calculated on the basis of shareable costs. In order to establish final shareable costs, individual hospital records must be reviewed and audited, following which they are scrutinized by provincial authorities. Shareable costs are calculated separately for each public hospital, and this calculation must be approved by the provincial authority and be certified by the provincial auditor and the federal Treasury Officer in the province. It is obvious, therefore, that the amount of the payments made by the provincial authority may differ considerably from the payments which are shareable as defined in the federal legislation and in the agreements. In addition, an amount will be due to provinces with respect to the hold-back on the national per capita in the advance formula.

The five provinces which participated during the calendar year 1958 were Newfoundland, British Columbia, Alberta, Saskatchewan and Manitoba. Final payments were made during the 1959-60 fiscal year to four of these five provinces with respect to 1958. The payment due to Manitoba had to be deferred because of problems related to the count of the number of insured persons in that province.

The amounts of the total contributions by Canada with respect to 1958 are shown on Table 4 for the provinces of Newfoundland, Saskatchewan, Alberta and British Columbia. From these contributions the advance payments were deducted, and the balance owing to each province was paid as a final 1958 payment. In addition to this information, Table 4 sets out the information used in calculating the total contribution for each of these four provinces.

4. TOTAL PAYMENTS BY CANADA

Total payments by Canada to each province during the 1959-60 fiscal year are shown on Table 5, and total payments since the date of the inception of the program, July 1, 1958, are shown by fiscal years for each province in Table 6.

TABLE 4

PARTICULARS OF 1958 FINAL CONTRIBUTIONS AND FINAL PAYMENTS, BY PROVINCE
COMPLETED DURING THE 1959-60 FISCAL YEAR⁽¹⁾

	Newfoundland	Saskatchewan	Alberta	British Columbia
1958 Advance Payments	\$1,844,041.50	\$ 5,549,641.61	\$ 5,816,421.82	\$ 8,080,554.94
1958 Final Payments	146,093.73	226,234.06	678,300.68	528,908.06
1958 Final Contributions ⁽²⁾	\$1,990,135.23	\$ 5,775,875.67	\$ 6,494,722.50	\$ 8,609,463.00
INFORMATION USED IN CALCULATING 1958 FINAL CONTRIBUTIONS:				
	Newfoundland	Saskatchewan	Alberta	British Columbia
Average number of insured persons ⁽³⁾	218,100	431,723	595,000	765,000
Cost of In-Patient Services ⁽⁴⁾	\$5,999,505.48	\$28,366,242.83	\$30,537,627.70	\$38,650,193.85
Per capita cost of in-patient services in province ⁽⁴⁾	\$ 13.7603	\$ 32.0523	\$ 25.6619	\$ 25.2616
Cost of Out-Patient Services ⁽⁵⁾	\$ 261,122.26	\$ 122,144.00	nil	nil
Gross Earnings from authorized charges for in-patient services ⁽⁶⁾	nil	nil	\$ 1,923,435.20	\$ 1,130,205.00
Per capita amount of authorized charges for in-patient services ⁽⁶⁾	nil	nil	\$ 3.2327	\$ 1.4774
TOTAL COST OF IN-PATIENT SERVICES IN CANADA ⁽⁷⁾	\$359,217,496.86			
PER CAPITA COST OF IN-PATIENT SERVICES IN CANADA ⁽⁷⁾	21.2329			

- (1) The 1958 Final contribution and final payment to the province of Manitoba was not completed during the 1959-60 fiscal year.
- (2) Calculated in accordance with section 4 of the Hospital Insurance and Diagnostic Services Act.
- (3) Calculated in accordance with section 5 of the Hospital Insurance Regulations.
- (4) Calculated in accordance with section 7 of the Hospital Insurance Regulations.
- (5) Calculated in accordance with section 8 of the Hospital Insurance Regulations.
- (6) Calculated in accordance with section 10 of the Hospital Insurance Regulations. There were no authorized charges in respect of insured out-patient services.
- (7) Calculated in accordance with section 6 of the Hospital Insurance Regulations.

TABLE 5

SUMMARY OF PAYMENTS MADE BY CANADA
TO PARTICIPATING PROVINCES
BY PROVINCE, 1959-60 FISCAL YEAR

PROVINCE	ADVANCE PAYMENTS (1)	FINAL PAYMENTS (2)	TOTAL PAYMENTS
Newfoundland	\$ 4,561,599.21	\$ 146,093.73	\$ 4,707,692.94
Prince Edward Island	447,338.27		447,338.27
Nova Scotia	8,162,540.78		8,162,540.78
New Brunswick	4,575,374.90		4,575,374.90
Ontario	71,892,833.66		71,892,833.66
Manitoba	11,324,466.35		11,324,466.35
Saskatchewan	13,152,145.37	226,234.06	13,378,379.43
Alberta	15,020,427.18	678,300.68	15,698,727.86
British Columbia	19,877,183.50	528,908.06	20,406,091.56
TOTALS	\$149,013,909.22	\$1,579,536.53	\$ 150,593,445.75

(1) Further particulars on Table 3

(2) Further particulars on Table 4

TABLE 6

TOTAL PAYMENTS MADE BY CANADA TO PARTICIPATING PROVINCES,
UNDER THE HOSPITAL INSURANCE AND DIAGNOSTIC SERVICES
ACT,
BY PROVINCE

PROVINCE	FISCAL YEAR		Total payments from July 1, 1958 to March 31, 1960
	1958-59	1959-60	
Newfoundland	\$ 2,857,886.84	\$ 4,707,692.94	\$ 7,565,579.78
Prince Edward Island		447,338.27	447,338.27
Nova Scotia	1,572,782.64	8,162,540.78	9,735,323.42
New Brunswick		4,575,374.90	4,575,374.90
Ontario	13,140,213.12	71,892,833.66	85,033,046.78
Manitoba	7,148,534.97	11,324,466.35	18,473,001.32
Saskatchewan	8,430,441.93	13,378,379.43	21,808,821.36
Alberta	8,774,575.68	15,698,727.86	24,473,303.54
British Columbia	12,784,038.88	20,406,091.56	33,190,130.44
TOTALS	\$ 54,708,474.06	\$ 150,593,445.75	\$ 205,301,919.81

V. CONCLUSION

In this Report, developments in the Hospital Insurance and Diagnostic Services program are outlined. Summaries are given of federal and provincial legislation as in force at the end of the calendar year 1960. Figures are provided with reference to the estimated number of insured persons as on March 31, 1960. Details are given of the federal payments made during the fiscal year under review in the form of adjustment payments to participating provinces for the calendar year 1958, and in the form of advance payments to participating provinces during the fiscal year 1959-60, in accordance with agreements under the Hospital Insurance and Diagnostic Services Act.

As reported last year, technical problems which arise from time to time, have been and are continuing to be satisfactorily resolved, reflecting the constructive and helpful attitude of the provincial authorities, the hospital authorities, and the medical staffs involved in the joint program.

In expressing appreciation to these authorities for the collaboration maintained with departmental officials, the Minister of National Health and Welfare is also grateful for the co-operation of other federal departments. He commends the members of his own staff for the manner in which they have carried out their duties in connection with the program.

APPENDIX A

PROVINCIAL AUTHORITIES - HOSPITAL INSURANCE

PARTICIPATING PROVINCES

NEWFOUNDLAND

Dr. Leonard Miller,
Deputy Minister of Health,
St. John's, Newfoundland.

PRINCE EDWARD
ISLAND

Dr. L. E. Prowse,
Chairman,
Hospital Services Commission of
Prince Edward Island,
P.O. Box 4500,
Charlottetown, P. E. I.

NOVA SCOTIA

Mr. H. W. Murdock,
Chairman,
Hospital Insurance Commission,
Box 1057,
Halifax, Nova Scotia.

NEW BRUNSWICK

Dr. D. A. van Binnendyk,
Executive Director,
Hospital Services Commission of
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P.O. Drawer 1297,
Fredericton, N. B.

QUEBEC

Dr. Jules Gilbert,
Director General,
Hospital Insurance Service,
580 est Grande-Allee,
Quebec, Quebec.

ONTARIO

Dr. R. W. Ian Urquhart,
Chairman,
Ontario Hospital Services Commission,
2195 Yonge Street,
Toronto, Ontario.

MANITOBA

Mr. G.L. Pickering,
Commissioner of Hospitalization,
Manitoba Hospital Services Plan,
Box 925,
Winnipeg, Manitoba.

SASKATCHEWAN

Dr. F.B. Roth,
Deputy Minister of Public Health,
Health and Welfare Building,
Regina, Saskatchewan.

ALBERTA

The Honourable J. Donovan Ross, M.D.,
Minister of Health,
Edmonton, Alberta.

Dr. J.D. Wallace,
Director,
Hospitals Division,
Department of Public Health,
Room 228, Administration Building,
Edmonton, Alberta

BRITISH COLUMBIA

Mr. Donald M. Cox,
Deputy Minister of Hospital Insurance,
Department of Health Services and
Hospital Insurance,
Victoria, B.C.

NORTHWEST
TERRITORIES

Dr. H.A. Procter,
Chairman,
Territorial Hospital Services Board,
Room 301, Kent-Albert Building,
Ottawa, Ontario.

YUKON TERRITORY

Mr. F.H. Collins,
Commissioner of Yukon Territory,
P.O. Box 2029,
Whitehorse, Yukon.



Annual Report

of the Minister of National Health and Welfare

Under the

Hospital Insurance

and

Diagnostic Services Act



for the Fiscal Year Ended March 31, 1961

ANNUAL REPORT
OF THE MINISTER OF NATIONAL HEALTH AND WELFARE
ON THE OPERATION OF
AGREEMENTS WITH THE PROVINCES
UNDER THE
HOSPITAL INSURANCE AND DIAGNOSTIC SERVICES ACT
FOR THE FISCAL YEAR ENDED
MARCH 31, 1961

INDEX OF TABLES

		<u>PAGE</u>
TABLE A	- Number of Insured Persons On March 31st, 1961, By Province, As Reported for Purposes of Advance Payments	7
TABLE B	- Net Population Certified by the Dominion Statistician, By Province, As used for Calculation of Per Capita Costs and for Making Advance Payments to Non-Premium Provinces	8
TABLE C	- Summary of Payments Made by Canada to Participating Provinces, By Province, 1960-61 Fiscal Year	10
TABLE D	- Payments By Canada - Fiscal Years 1958-59, 1959-60, 1960-61 and Total Payments July 1, 1958 - March 31, 1961.	11
TABLE E	- Payments by Canada - July 1, 1958 to March 31, 1961, By Province and By Calendar Year	13
TABLE F	- Cost of In-Patient Services, 1959; Net Population, June 1, 1959; Total and 25% Per Capita Cost, 1959, By Province.	14
TABLE G	- Contribution by Canada With Respect to In-Patient Services, 1959	15
TABLE H	- Contribution by Canada with Respect to Out-Patient Services, 1959	15
TABLE J	- Total Contributions and Final Payments by Canada, 1959	17
TABLE K	- Cost of In-Patient Services by Province, 1959, For Provinces Which Participated for the Complete Year	18

- - - - -

INDEX OF TABLES (Cont'd)

	<u>PAGE</u>
TABLE I - Number of Hospitals and Related Facilities Listed in Hospital Insurance Agreements, At December 31, 1959, By Province . . .	22
TABLE II - Number of Beds and Cribs Set up on December 31, 1959, and Rate Per 1,000 Estimated Population, in Hospitals Listed in Hospital Insurance Agreements, By Province	22
TABLE III - Number of Beds and Cribs set up on December 31, 1959, by Ownership in Hospitals Listed in Hospital Insurance Agreements, By Ownership and By Province	23
TABLE IV - Number and Percentage Distribution of Beds and Cribs Set up on December 31, 1959, by Type of Bed and Size of Hospital, in Budget Review General Hospitals	25
TABLE V - Standard Ward Beds as a Percent of Total Accommodation Beds set up on December 31, 1959, in Hospitals Listed in Hospital Insurance Agreements, By Province . . .	26
TABLE VI - Total Patient-Days During Year, Insured Patient-Days During Year, Insured Patient-Days as a Percent of Total Patient-Days and Rates Per 1,000 Total Population and per 1,000 Insured Population, Adults and Children, in Hospitals Listed in Hospital Insurance Agreements, By Province, 1959	28
TABLE VII - Number and Percentage Distribution of Total Patient-Days During Year, Adults and Children, in Hospitals Listed in Hospital Insurance Agreements, By Status of Hospital, By Province, 1959	31
TABLE VIII - Number of Adult and Child Patient-Days in Standard, Semi-Private and Private Wards, and Percentages of Total Patient-Days in Budget Review Hospitals, by Province, 1959	32

INDEX OF TABLES (Cont'd)

	<u>PAGE</u>
TABLE IX - Number of Adult and Child Patient-Days in Standard, Semi-Private and Private Wards, and Percentages of Total Patient-Days in Contract Hospitals, By Province, 1959	33
TABLE X - Number and Percentage Distribution of Adult and Child Separations, by Length of Stay from Date of Admission and by Province, Budget Review General Hospitals, 1959	36
TABLE XI - Average Length of Stay From Date of Admission for Adults and Children Separated from Hospital During Year (Discharges and Deaths), by Bed-Size of Hospital and by Province, Budget Review General and Chronic Hospitals, 1959	37
TABLE XII A - Percentage Occupancy of Total Accommodation Beds and Cribs Set up in Budget Review General Hospitals, by Bed-Size of Hospital and by Province, 1959	38
TABLE XII B - Percentage Occupancy of Standard Ward and Preferred Accommodation Beds and Cribs set up in Budget Review General Hospitals, by Bed-Size of Hospital and by Province, 1959	39
TABLE XIII - Number of In-Patient Surgical Operations, In-Patient Radiographic Examinations and Average Per 100 Admissions in Budget Review Hospitals, By Province, 1959	42
TABLE XIV - Number of Persons Employed Full-Time or in Training for Selected Professional Categories, in Hospitals Covered Under Provincial Agreements by Province, as at December 31, 1959	43
TABLE XV - Amount of Revenue Fund Expenditures by Type of Account, Budget Review Hospitals, By Province, 1959	44

INDEX OF TABLES (Cont'd)

	<u>PAGE</u>
TABLE XVI - Revenue Fund Expenditures Per Patient Day by Type of Account, Budget Review Hospitals, By Province, 1959	45
TABLE XVII - Revenue Fund Expenditures per Capita by Type of Account, Budget Review Hospitals, By Province, 1959	47
TABLE XVIII - Percentage Distribution of Revenue Fund Expenditures by Type of Account, Budget Review Hospitals, By Province, 1959 . . .	48

This is the third Annual Report made to Parliament after the termination of a fiscal year, respecting the operation for that year of agreements under the Hospital Insurance and Diagnostic Services Act with provinces participating in the federal-provincial hospital insurance program.

By the end of the fiscal year under review, all of the provinces and territories were operating hospital insurance programs in accordance with agreements signed with the federal government. As noted in the last Annual Report, an agreement was signed on December 19, 1960, with the province of Quebec and the program in that province commenced on January 1, 1961. The agreements with the Northwest Territories (March 28, 1960) and the Yukon (June 29, 1960) enabled the two territories to initiate hospital insurance programs (in those jurisdictions) on April 1st, and July 1st, 1960, respectively. The details of these programs were described in the last Annual Report.

There have been a number of amendments made to existing agreements, many of which related to the list of participating hospitals contained in one of the schedules to the federal-provincial agreement concluded in accordance with the Act. In most instances additional hospitals were added to those already participating in the provincial program; in Ontario the listing of a number of nursing homes providing chronic care which had been included in the program on a temporary basis, as described in the Annual Report last year, was extended to permit the continued participation of these nursing homes for an additional temporary period.

In addition to these amendments pertaining to participating hospitals, there were a number of amendments made in other Schedules to the agreements. Among these, were amendments in the agreements with Alberta, British Columbia and Saskatchewan, pertaining to approved drugs. The Alberta agreement was also amended in connection with provincial payments to hospitals in the province and with regard to amount of the provincial authorized charges which, in some categories of hospitals, were slightly increased, although no change was made in the maximum amount of the authorized charge. There were changes relating to the method of payments to hospitals in Ontario and New Brunswick.

The agreement with New Brunswick was amended quite considerably to conform with changes made in the provincial program. These changes included the elimination of the premium system of provincial financing, which came into effect on January 1, 1961. From that date the provincial share of costs has been paid out of general revenues of the province. With the elimination of the

premium system, amendments were required to be made in the agreement pertaining to the arrangements by which residents of the province become insured and in the method of determining the number of insured persons in the province.

There was also an amendment in the agreement with Prince Edward Island pertaining to the provincial method of premium payments, but this amendment was more in the nature of a refinement than a change since the payment of premiums on a partially compulsory basis only, continues in force in that province.

During the year under review there was no change in the scope of insured services although discussions were under way in some provinces with regard to extensions to out-patient services.

Throughout the year under review there was very considerable activity in the work of the Advisory Committee on Hospital Insurance and Diagnostic Services and its three sub-committees concerned with Quality of Care, Research and Statistics; Finance and Accounting; and Residence and Uniformity of Benefits. The two former sub-committees allocated specific technical problems to smaller working parties which were concerned with matters pertaining to hospital Admission/Discharge Forms to be used in all provinces so that provincial data could be standardized and comparable; hospital standards which would also provide some yardstick to hospital administrators and planners; and expenditures of a capital nature which are excluded from hospital insurance as opposed to maintenance expenditures which are shareable.

Since all of the provinces as well as the federal government are represented on both the Advisory Committee on Hospital Insurance and Diagnostic Services and its sub-committees, the close working partnership established between the two levels of government has been continuously maintained. The Sub-committee on Finance and Accounting met in Ottawa for two days in June 1960, followed by a two-day meeting of the Sub-committee on Residence and Uniformity of Benefits. In August 1960, a meeting of the Sub-committee on Quality of Care, Research and Statistics immediately preceded a meeting of the Advisory Committee itself, each meeting lasting two days. In October and November 1960 meetings were held of two working parties and a third working party for the purpose of setting up guide material for hospital standards, held its first meeting in Ottawa in February 1961.

These meetings of federal and provincial officers, coupled with those necessitated from time to time in individual provinces, have

resulted in a close working relationship between the two levels of government and problems of mutual interest are brought to a permanent forum in which they can be discussed very frankly and constructively.

Although this report to Parliament is concerned with the operation of the agreements during the fiscal year, hospital records in Canada, both financial and statistical, are maintained on the basis of a calendar year. As explained in earlier reports, the amount of the federal contribution as set out in the Hospital Insurance and Diagnostic Services Act is also on the basis of the calendar year. These monies, however, are paid to the provinces on the basis of amounts voted by Parliament in relation to the fiscal year.

This Report contains financial information relating to advance payments on contributions made to the provinces in accordance with the formula set out in the Hospital Insurance Regulations, during the fiscal year ended March 31, 1961. It had been anticipated that the adjusted payments to the provinces for the calendar year 1959 determined on the basis of shareable costs and in accordance with the formula prescribed in the Act, would also be made during the fiscal year under review. However, since not all of the provinces had completed the necessary procedures in time, the adjustment payments were not made before the close of the year under review. It should be explained that since the national per capita cost of hospital services is an integral part of the formula upon which contributions are based, it is not possible to calculate the final contribution until costs in all provinces are available.

The only final payment which was made during the present fiscal year was the payment due to Manitoba for 1958 to which reference was made in the last report to Parliament.

In the last Report it was noted that the Annual Returns of Hospitals for the year 1959 were being received and analysed. Certain data and tabulations derived from these Returns are presented in this Report insofar as they relate to provinces which were participating in the year 1959. It is anticipated that changes which have been made in the procedures for dealing with statistical material from these Returns will result in its earlier availability and analysis in subsequent Reports.

The Number of Persons Covered

The number of insured persons in participating provinces as reported in the last Report to Parliament was 11,984,302. The

number of persons covered at the end of the fiscal year under review was 17,673,144, an increase of 5,688,842. This increase was almost entirely due to the participation of Quebec. As noted earlier, by the end of the fiscal year under review all residents in all jurisdictions of Canada were entitled to hospital insurance subject to the provisions set out in the Act.

In presenting data related to the number of persons covered by the provincial programs, regard must be had to the varying methods used by the provinces for calculating the number of insured persons. In provinces which levy a premium, insured persons are registered and identification certificates are provided. However, the methods of registration in some provinces consist of the registration of single persons on the one hand, and family heads on the other. Thus, in some of these premium provinces, it is possible to give the precise number of single subscribers and of family subscribers; the number of persons covered by the family subscriber, however, is not known since the family rate applies wherever a family head has one or more dependants.

In order to make a more precise count with regard to the family groups in premium provinces where no head count is made, therefore, it has been necessary to calculate the number of dependants in the average family unit in the province. In this way, it is possible to estimate the number of persons in the province eligible for and entitled to insured services at the end of each month, an estimation which is required to be made in connection with the amount of the federal contribution and contained in the formula set out in the Act. The average family unit in the provinces concerned is calculated by the Dominion Statistician.

In provinces where no premiums are levied and where the provincial share of costs is paid out of general revenue, sales or property tax, no individual registration of insured persons is required and coverage is universal. Insofar as these provinces are concerned, provision was made in the Agreements for calculation on the basis of a population estimate for a given date in the year (June 1) as determined by the Dominion Statistician.

The Hospital Insurance Regulations define 'population' to mean the population of Canada or of the province, as certified by the Dominion Statistician, and, calculated for a calendar year in which a census was taken, as the population of Canada or of the province as ascertained by the census; for other than a census year, the population of Canada or of the province on the 1st day of June in that year according to published original intercensal estimates of the Dominion Statistician.

There are certain categories of persons with respect to whom hospital services are provided under a statute other than the hospital insurance legislation, who are therefore not entitled to insured services. For the most part, these consist of members of the Armed Forces and the Royal Canadian Mounted Police. In addition, inmates of federal penitentiaries are provided with similar services by the federal government. All of these groups together account for a very small proportion of the total population. In the D.B.S. population estimates, therefore, the number of the members of the regular forces, members of the Royal Canadian Mounted Police and persons serving terms of imprisonment in a federal penitentiary are deducted so as to provide a net population figure for the purpose of calculating the eligible population.

With the exception of Ontario and Prince Edward Island, participation by residents in the program was either automatic or compulsory, depending on the methods of provincial financing. In Newfoundland, Nova Scotia, New Brunswick (since January 1, 1961) Quebec, Alberta, British Columbia, the Northwest Territories and the Yukon, residents were automatically insured for hospital insurance. In Manitoba and Saskatchewan all residents are required to pay the relevant premium or tax, hospital insurance coverage being universally compulsory. In Ontario and Prince Edward Island, compulsory coverage is limited to certain employed or designated groups, while coverage remains voluntary for other residents.

Table A shows the estimated number of insured persons on March 31, 1961 as reported by the provinces for advance payments, by province and the percentage of persons insured. Of the total advance estimate of net population calculated by the Dominion Statistician totalling 18,080,000, the estimated number of insured persons at the end of the fiscal year was 17,673,144, or nearly 98%. It will be noted that the figures shown in the first and second columns are identical for all provinces with the exception of Prince Edward Island, Ontario, Manitoba and Saskatchewan, reflecting the position described above with regard to non-premium provinces.

Table B shows the net population certified by the Dominion Statistician for purposes of the hospital insurance program which was used for making advance payments in non-premium provinces and for calculating the per capita costs in connection with advance payments. The first column which shows the population based on an advance estimate for June 1, 1960 totalling 17,728,000, was used for calculating the advance payments to non-premium provinces for the first two months of the fiscal year under review, April and May 1960; it was also used for calculating the estimated national per capita costs for the calendar year 1960.

The second column is the net population based on original published intercensal estimate totalling 17,682,000, and was used for the purpose of calculating advance payments to non-premium provinces for the months of June to December inclusive during the calendar year 1960.

The third column shows the estimated population based on an advance estimate for June 1, 1960, totalling 18,080,000, which was used for calculating the advance payments to non-premium provinces for the months of January to March inclusive for the calendar year 1961.

As mentioned previously, New Brunswick was a premium province until December 31, 1960 after which time the non-premium system was instituted and population calculations commenced to be based on the net population certified by the Dominion Statistician commencing January 1, 1961.

TABLE A
NUMBER OF INSURED PERSONS ON MARCH 31ST, 1961
BY PROVINCE
AS REPORTED FOR PURPOSES OF ADVANCE PAYMENTS

PROVINCE	Number of Insured Persons March 31, 1961	Advance Estimate of Net Population June 1, 1961	Percentage of Persons Insured
Newfoundland	470,000	470,000	100.0%
Prince Edward Island	85,522	104,000	82.2%
Nova Scotia	711,000	711,000	100.0%
New Brunswick	604,000	604,000	100.0%
Quebec	5,208,000	5,208,000	100.0%
Ontario	5,817,427	6,184,000	94.1%
Manitoba	898,605	903,000	99.5%
Saskatchewan	895,590	913,000	98.1%
Alberta	1,315,000	1,315,000	100.0%
British Columbia	1,631,000	1,631,000	100.0%
Yukon	14,000	14,000	100.0%
Northwest Territories	23,000	23,000	100.0%
CANADA	17,673,144	18,080,000	97.7%

TABLE B

NET POPULATION CERTIFIED BY THE DOMINION STATISTICIAN,
BY PROVINCE
AS USED FOR CALCULATION OF PER CAPITA COSTS AND FOR
MAKING ADVANCE PAYMENTS TO NON-PREMIUM PROVINCES

PROVINCE	June 1, 1960		June 1, 1961
	Based on Advance Estimate	Based on Original Published Intercensal Estimate	Based on Advance Estimate
Newfoundland	456,000	457,000	470,000
Prince Edward Island	103,000	102,000	104,000
Nova Scotia	703,000	702,000	711,000
New Brunswick	592,000	593,000	604,000
Quebec	5,108,000	5,087,000	5,208,000
Ontario	6,063,000	6,046,000	6,184,000
Manitoba	888,000	888,000	903,000
Saskatchewan	908,000	907,000	913,000
Alberta	1,274,000	1,272,000	1,315,000
British Columbia	1,600,000	1,594,000	1,631,000
Yukon	13,000	13,000	14,000
Northwest Territories	20,000	21,000	23,000
CANADA	17,728,000	17,682,000	18,080,000

Federal Payments to the Provinces

The methods used for calculating the amount of federal payments to the provinces, both with regard to advance payments and to final adjustments, were explained in the two previous reports to Parliament. It will be recalled that advance payments are made in accordance with a formula set out in the Hospital Insurance Regulations and are based on the amount of provincial payments to participating hospitals. In this formula, there is built in a calculation for a holdback of federal funds to which the province would be entitled for final adjusted payments, through the use of the percentage of 22% instead of 25% of the national per capita cost.

The final adjusted payment is calculated on the basis of a formula contained in the Act and the contribution is based on costs which are shareable in accordance with the provisions of the law. Since the final adjusted payment is based on a calendar year and must be calculated after the audited costs of participating hospitals are available, there is inevitably a time lag so that it may occur that final adjusted payments for a given calendar year may not be completed before the end of the following fiscal year. In fact, the final adjusted payment for 1959 was not wholly completed before the end of the fiscal year under review and federal payments could not therefore be made before the close of the fiscal year. However, since most of the details were already available by the end of March 1961, data concerning these payments are shown below.

Table C shows the amount of the federal payments to the provinces during the fiscal year 1960-61. It will be noted that federal payments to the provinces totalled nearly 190 million dollars. With the exception of an outstanding final payment to Manitoba for 1958, to which reference was made in the previous report to Parliament, this amount represented advance payments. It will be noted that some 186½ million dollars was for in-patient services, while some 2½ million was for out-patient services.

Table D shows the total payments made by the federal government to participating provinces for each fiscal year since the inception of the hospital insurance program on July 1, 1958. From that date until the end of the fiscal year under review, nearly 400 million dollars was paid by the federal government to participating provinces.

TABLE C
SUMMARY OF PAYMENTS MADE BY CANADA TO PARTICIPATING PROVINCES,
BY PROVINCE, 1960-61 FISCAL YEAR

PROVINCE	Advance Payments			Final Payments	Total Payments
	In-Patient	Out-Patient	Total		
Newfoundland	\$ 4,833,410.86	\$ 261,523.35	\$ 5,094,934.21	\$ -	\$ 5,094,934.21
Prince Edward Island	945,590.19	65,216.35	1,010,806.54	-	1,010,806.54
Nova Scotia	8,999,101.67	596,285.85	9,595,387.52	-	9,595,387.52
New Brunswick	7,766,843.20	147,569.51	7,914,412.71	-	7,914,412.71
Quebec	13,936,740.72	-	13,936,740.72	-	13,936,740.72
Ontario	83,395,891.14	1,088,380.72	84,484,271.86	-	84,484,271.86
Manitoba	12,885,696.29	117,171.97	13,002,868.26	46,047.93	13,048,916.19
Saskatchewan	14,042,691.20	410,772.79	14,453,463.99	-	14,453,463.99
Alberta	16,905,597.57	-	16,905,597.57	-	16,905,597.57
British Columbia	22,493,438.52	-	22,493,438.52	-	22,493,438.52
Yukon	168,117.15	566.60	168,683.75	-	168,683.75
Northwest Territories	260,892.89	957.00	261,849.89	-	261,849.89
TOTALS	\$ 186,634,011.40	\$ 2,688,444.14	\$ 189,322,455.54	\$ 46,047.93	\$ 189,368,503.47

TABLE D

PAYMENTS BY CANADA - FISCAL YEARS 1958-59, 1959-60, 1960-61
AND TOTAL PAYMENTS JULY 1, 1958 - MARCH 31, 1961

PROVINCE	Fiscal Year			Total payments from July 1, 1958 to March 31, 1961
	1958-59	1959-60	1960-61	
Newfoundland	\$ 2,857,886.84	\$ 4,707,692.94	\$ 5,094,934.21	\$ 12,660,513.99
Prince Edward Island	—	447,338.27	1,010,806.54	1,458,144.81
Nova Scotia	1,572,782.64	8,162,540.78	9,595,387.52	19,330,710.94
New Brunswick	—	4,575,374.90	7,914,412.71	12,489,787.61
Quebec	—	—	13,936,740.72	13,936,740.72
Ontario	13,140,213.12	71,892,833.66	84,484,271.86	169,517,318.64
Manitoba	7,148,534.97	11,324,466.35	13,048,916.19	31,521,917.51
Saskatchewan	8,430,441.93	13,378,379.43	14,453,463.99	36,262,285.35
Alberta	8,774,575.68	15,698,727.86	16,905,597.57	41,378,901.11
British Columbia	12,784,038.88	20,406,091.56	22,493,438.52	55,683,568.96
Yukon	—	—	168,683.75	168,683.75
Northwest Territories	—	—	261,849.89	261,849.89
TOTALS	\$ 54,708,474.06	\$ 150,593,445.75	\$ 189,368,503.47	\$ 394,670,423.28

Since total contributions to the provinces are based on the calendar year, Table E shows the total payments made by the federal government to participating provinces by calendar years since the inception of the hospital insurance program.

The final adjusted contributions payable for 1959 were calculated on the basis of 25% of the per capita cost of in-patient services in Canada plus 25% of the per capita cost of in-patient services in the province, less the per capita amount of authorized charges if any, multiplied by the average for the year of the number of persons in the province who were eligible for and entitled to insured services at the end of each month in that year. Since not all of the provinces were participating during 1959, the per capita cost of providing in-patient services across the country was not a simple one to calculate, reliance having to be placed on several sources of data in non-participating provinces.

The per capita cost of in-patient services in 1959 is shown in Table F. It will be noted that the national per capita was nearly \$25.00 and that in five provinces the cost exceeded this national figure. As a result, in these provinces the federal contribution represented a percentage of less than 50%, whereas the participating provinces in which the per capita cost was less than the national, received contributions exceeding 50% of their costs.

Table G shows the total contribution for in-patient services in 1959 as calculated in the formula described above. The total contribution of nearly 150 million dollars was payable to the nine provinces which were participating by the end of that calendar year. It will be recalled that only seven provinces participated during the whole year, while New Brunswick initiated its program only on July 1, 1959 and Prince Edward Island on October 1, 1959.

Table H shows the amount of the federal contribution which was payable for out-patient services in 1959. In this connection, it should be recalled that the scope of out-patient services varies very considerably from province to province. It is this variation which accounts for the fact that the out-patient contribution to Nova Scotia equalled more than one half that payable to Ontario although the population of Ontario is many times greater than this figure would appear to show. The scope of services in Nova Scotia, however, is relatively broad, while the Ontario out-patient services were limited to emergencies within twenty-four hours of accident. It is to be noted that the federal contribution towards the cost of out-patient services, in a province is in the same proportion as the federal contribution for in-patient services in that province.

TABLE E

PAYMENTS BY CANADA - JULY 1, 1958 TO MARCH 31, 1961
BY PROVINCE AND BY CALENDAR YEAR

PROVINCE	1958	1959	1960	1961
	Contributions	Advances	Advances	Advances
Newfoundland	\$ 1,990,135.23	\$ 4,364,735.37	\$ 4,993,523.94	\$ 1,312,119.45
Prince Edward Island	—	206,787.11	1,072,409.01	178,948.69
Nova Scotia	—	7,472,186.76	9,284,357.41	2,574,166.77
New Brunswick	—	2,979,727.52	7,324,197.80	2,185,862.29
Quebec	—	—	—	13,936,740.72
Ontario	—	66,276,710.28	80,860,904.31	22,379,704.05
Manitoba	4,779,865.66	10,900,816.39	12,599,069.20	3,242,166.26
Saskatchewan	5,775,875.67	12,826,894.81	14,087,667.58	3,571,847.29
Alberta	6,494,722.50	14,362,662.57	16,378,049.85	4,143,466.19
British Columbia	8,609,463.00	19,136,629.62	21,955,549.87	5,981,926.47
Yukon	—	—	112,205.47	56,478.28
Northwest Territories	—	—	180,126.09	81,723.80
TOTAL	\$ 27,650,062.06	\$ 138,527,150.43	\$ 168,848,060.53	\$ 59,645,150.26
CUMULATIVE TOTAL	\$ 394,670,423.28			

TABLE F

**COST OF IN-PATIENT SERVICES, 1959; NET POPULATION, JUNE 1, 1959;
TOTAL AND 25% PER CAPITA COST, 1959, BY PROVINCE**

PROVINCE	Cost of In-Patient Services 1959	Net Population At June 1, 1959	Per Capita Cost	
			Total	25% 1959
Newfoundland	\$ 7,304,160.36	448,000	\$ 16.3039	\$ 4.0760
Prince Edward Island	1,582,861.00	101,000	15.6719	3.9180
Nova Scotia	14,402,853.40	696,000	20.6938	5.1735
New Brunswick	12,383,380.45	583,000	21.2408	5.3102
Quebec	93,324,876.00	4,980,000	18.7399	4.6850
Ontario	162,184,056.06	5,908,000	27.4516	6.8629
Manitoba	24,342,268.00	874,000	27.8516	6.9629
Saskatchewan	31,214,755.68	899,000	34.7216	8.6804
Alberta	35,541,554.53	1,232,000	28.8487	7.2122
British Columbia	44,114,706.55	1,556,000	28.3514	7.0879
Yukon and Northwest Territories	287,346.00	33,000	8.7075	2.1769
CANADA	\$ 426,682,818.03	17,310,000	\$ 24.6495	6.1624

TABLE G
CONTRIBUTION BY CANADA WITH RESPECT TO IN-PATIENT SERVICES, 1959

PROVINCE	25% of National Per Capita	25% of Provincial Per Capita	Less 25% Per Capita Authorized Charges	Aggregate Per Capita Cost	Average Number of Insured Persons	In-Patient Contribution By Canada
Newfoundland	\$6.1624	\$4.0760	\$ -	\$ 10.2384	448,000	\$ 4,586,803.20
Prince Edward Island	6.1624	3.9180	-	10.0804	22,650	228,321.06
Nova Scotia	6.1624	5.1735	-	11.3359	696,000	7,889,786.40
New Brunswick	6.1624	5.3102	-	11.4726	285,901	3,280,027.81
Ontario	6.1624	6.8629	-	13.0253	5,535,980	72,107,800.29
Manitoba	6.1624	6.9629	-	13.1253	873,749	11,468,217.75
Saskatchewan	6.1624	8.6804	-	14.8428	878,060	13,032,868.97
Alberta	6.1624	7.2122	.9187	12.4559	1,232,000	15,345,668.80
British Columbia	6.1624	7.0879	.3751	12.8752	1,556,000	20,033,811.20
TOTAL CONTRIBUTIONS BY CANADA FOR IN-PATIENT SERVICES, 1959						\$ 147,973,305.48

TABLE H
CONTRIBUTION BY CANADA WITH RESPECT TO OUT-PATIENT SERVICES, 1959

PROVINCE	In-Patient Contribution	In-Patient Cost Less Authorized Charges	Out-Patient Cost	Out-Patient Contribution
Newfoundland	\$ 4,586,803.20	\$ 7,304,160.36	\$ 320,413.72	\$ 201,210.62
Prince Edward Island	228,321.06	1,582,861.00	49,938.60	7,203.43
Nova Scotia	7,889,786.40	14,402,853.40	474,181.36	259,753.36
New Brunswick	3,280,027.81	12,383,380.45	194,758.66	51,586.38
Ontario	72,107,800.29	162,184,056.06	1,130,225.06	502,503.42
Manitoba	11,468,217.75	24,342,268.00	186,346.00	87,792.00
Saskatchewan	13,032,868.97	31,214,755.68	583,229.35	243,511.49
TOTALS			\$ 2,939,092.75	\$ 1,353,560.70

Table J shows the total contribution payable by Canada to participating provinces with respect to 1959, totalling nearly 150 million dollars. It will be recalled, however, that advances had been made to the provinces in an amount exceeding 138 million dollars so that the amount of the final adjusted contribution for 1959 totals less than 11 million dollars.

Table K sets out the details of the cost of in-patient services in 1959 in the seven provinces which participated for the whole year. It will be noted that the provincial costs shown on the last line of this table are the final in-patient costs reported in Table "F". This table shows the amounts included or deducted in computing the in-patient costs.

Line two of Table K reflects depreciation on buildings and physical plant and the interest on hospital debt. In the provinces of Newfoundland, Alberta and British Columbia the depreciation on furniture and equipment is also included in this deduction as these provinces elected to finance furniture and equipment on an outright purchase basis. Payments for outright purchase of equipment in these provinces are shown in Section 2 of the table on the line entitled, "Equipment". In the province of Saskatchewan the provincially owned hospitals are on an outright purchase basis for furniture and equipment and the remainder of the hospitals are on a depreciation basis.

The amounts shown for room differentials in the offset income section amount to 50% of the net earnings of the hospitals from charges for private and semi-private accommodation over and above standard ward costs. In some provinces the remaining 50% of this income is left with the hospitals, while in others, varying methods are applied.

The provincial payments to federally-owned hospitals are shown in Section 2 of Table K. These are payments for insured in-patient services rendered to insured persons in hospitals operated by the Departments of Veterans Affairs, National Defence, and National Health and Welfare.

When insured services are furnished to a person in respect of an injury or disability, where such person is legally entitled to recover the cost of such services from some other person by way of damages, the hospital account is paid by the provincial authority, and action is then taken to recover the cost from the responsible third party. The amounts so recovered in respect of insured in-patient services are shown on the second last line of Table K. In most of the provinces procedures for making these recoveries were being set up in 1959, and as considerable time is involved in effecting these recoveries, the amounts shown for 1959 are considerably less than normal annual recoveries.

TABLE J
TOTAL CONTRIBUTIONS AND FINAL PAYMENTS BY CANADA, 1959

PROVINCE	Contributions By Canada, 1959			Less: Advances	Final Amounts Payable for 1959
	In-Patient	Out-Patient	Total		
Newfoundland	\$ 4,586,803.20	\$ 201,210.62	\$ 4,788,013.82	\$ 4,364,735.37	\$ 423,278.45
Prince Edward Island	228,321.06	7,203.43	235,524.49	206,787.11	28,737.38
Nova Scotia	7,889,786.40	259,753.36	8,149,539.76	7,472,186.76	677,353.00
New Brunswick	3,280,027.81	51,586.38	3,331,614.19	2,979,727.52	351,886.67
Ontario	72,107,800.29	502,503.42	72,610,303.71	66,276,710.28	6,333,593.43
Manitoba	11,468,217.75	87,792.00	11,556,009.75	10,900,816.39	655,193.36
Saskatchewan	13,032,868.97	243,511.49	13,276,380.46	12,826,894.81	449,485.65
Alberta	15,345,668.80	—	15,345,668.80	14,362,662.57	983,006.23
British Columbia	20,033,811.20	—	20,033,811.20	19,136,629.62	897,181.58
TOTALS	\$ 147,973,305.48	\$ 1,353,560.70	\$ 149,326,866.18	\$ 138,527,150.43	\$ 10,799,715.75

TABLE K
COST OF IN-PATIENT SERVICES
BY PROVINCE, 1959
FOR PROVINCES WHICH PARTICIPATED FOR THE COMPLETE YEAR

	Newfoundland	Nova Scotia	Ontario	Manitoba	Saskatchewan	Alberta	British Columbia
1. Hospitals listed in Part I of Schedule "A":							
Operating Expenses	8,131,917.65	18,601,782.84	196,432,245.36	28,551,459.00	38,854,670.92	43,576,919.05	51,695,200.04
Less:							
Depreciation and interest	361,432.93	885,692.10	8,545,460.91	1,345,149.00	1,677,986.12	3,376,552.62	2,783,227.84
Direct costs of research, ambulance and O.P.D.	74,491.69	105,474.15	2,982,850.08	234,447.00	2,368.27	28,661.87	259,364.43
Unapproved expenses	23,889.32	306,829.94	1,352,183.24	129,018.00	1,245,550.75	1,022,884.53	808,755.19
Offset Income:							
Federal Government	(231,078.00)	75,356.55	769,682.24	58,329.00	402,707.90	(1,285,492.66)	185,215.50
Workmen's Compensation	()	246,803.70	3,810,130.07	342,715.00	469,537.38	()	1,119,774.24
Non-Residents	37,601.70	184,406.92	1,378,100.22	716,269.00	459,154.67	600,872.51	300,775.26
Care Deemed Unnecessary	8,817.80	110,592.83	134,249.22	12,770.00	80,609.20	41,401.00	393,954.75
Room Differential	127,078.05	605,866.10	6,371,741.71	440,013.00	315,950.45	757,791.79	839,067.61
Non-benefit drugs	-	-	6,799.14	-	560,516.11	-	80,789.02
Out-patient Services	530,681.65	999,192.77	10,263,679.49	612,862.00	1,535,137.53	1,180,342.54	2,010,665.40
Recoveries and Sales	574,775.04	1,265,059.18	7,771,440.80	730,537.00	1,489,094.62	1,577,798.75	2,120,546.33
Other Income	118,192.02	117,557.77	1,016,452.98	1,296,411.00	427,785.58	488,564.17	358,752.50
Total Deductions	2,088,038.20	4,902,832.01	44,402,770.10	5,918,520.00	8,666,398.58	10,360,362.44	11,251,888.07
Net Operating Costs	6,043,879.45	13,698,950.83	152,029,475.26	22,632,939.00	30,188,272.34	33,216,556.61	40,443,311.97
2. Provincial Payments:							
Equipment	504,829.22	-	-	-	65,005.30	726,247.45	740,914.79
Contract Hospitals	619,130.45	49,777.20	4,362,826.00	253,703.00	108,801.29	15,854.00	622,809.95
Federal Hospitals	36,070.00	551,720.40	4,699,976.40	1,147,294.00	278,674.92	1,097,858.72	1,857,759.30
Out-of-Province Care	112,631.94	104,249.57	1,220,803.42	346,006.00	577,173.15	323,140.50	346,174.41
3. Authorized Charges:							
Contract Hospitals	-	-	-	-	-	5,738.00	40,327.00
Federal Hospitals	-	-	-	-	-	166,847.90	128,632.00
4. Sub-total	7,316,541.06	14,404,698.00	162,313,081.08	24,379,942.00	31,217,927.00	35,552,243.18	44,179,929.42
5. Amounts Recovered	12,380.70	1,844.60	129,025.02	37,674.00	3,171.32	10,688.65	65,222.87
	7,304,160.36	14,402,853.40	162,184,056.06	24,342,268.00	31,214,755.68	35,541,554.53	44,114,706.55

Data derived from the Annual Return of
Hospitals for the Calendar Year 1959

It has been explained in previous reports to Parliament on the operation of the agreements under the Hospital Insurance and Diagnostic Services Act, that statistical and financial data are maintained by hospitals in Canada on the basis of the calendar year. In the first report, it was explained that the hospital reports previously submitted to the Dominion Bureau of Statistics pursuant to the Statistics Act, would be replaced by a new and expanded return designed to meet both the requirements of the Statistics Act and the provincial undertakings embodied in the agreements with the provinces under the Hospital Insurance and Diagnostic Services Act as well as provincial requirements. The new Return was designed in such a way as to meet the needs of the Dominion Bureau of Statistics and the Department of National Health and Welfare, thus avoiding the necessity of requiring hospitals to complete two separate returns, one for each of the federal agencies to whom responsibilities were given under two separate statutes.

The Return itself was designed by the two departments concerned in consultation with the provincial authorities and subsequently revised and approved by the Advisory Committee on Hospital Insurance and Diagnostic Services. Much of the technical work had been carried out by the Sub-Committee on Quality of Care, Research and Statistics, and the Sub-Committee on Finance and Accounting, on which were representatives of all the provinces and interested federal departments including the Dominion Bureau of Statistics.

The Return consists of two main parts, the first pertaining to facilities and services and the second pertaining to finances. Two booklets were prepared for the use of individual hospitals, containing Instructions and Definitions.

Part I of the Annual Return relating to facilities and services, was divided into six main parts: classification of hospital; beds; utilization data; departmental service data; personnel; and training facilities. Part II contained an auditor's certificate, including certification by the provincial authority; details of the revenue fund; details of the plant fund; and details of the endowment fund.

Since the Annual Return of Hospitals was designed to serve the purpose of the Statistics Act as well as the Hospital Insurance and Diagnostic Services Act, Returns were required to be made in 1959 by hospitals in all provinces, whether or not they were

participating in the hospital insurance program. However, since this Report is limited to the operation of agreements, the data included pertains either to all of the provinces which participated during the whole of the calendar year 1959 or, where noted in the data, to hospitals in provinces participating by the end of 1959. In this connection, it should be noted that seven provinces were operating hospital insurance programs throughout 1959: British Columbia, Alberta, Saskatchewan, Manitoba, Ontario, Nova Scotia and Newfoundland. Two additional provinces inaugurated hospital insurance programs before the end of 1959; New Brunswick July 1, 1959 and Prince Edward Island, October 1, 1959.

In the statistical and financial data in this part of the report, it will be noted that reference is made to budget review hospitals, budget review general hospitals and contract hospitals. As explained in last year's report, hospitals participating in the hospital insurance program are designated as budget review hospitals, which comprise the bulk of hospitals listed in the agreement since these include the public hospitals in the provinces; and contract hospitals which are defined in the hospital insurance regulations as private or industrial hospitals with which a province has contracted for the provision of insured services. The third category of hospitals specifically designated in the hospital insurance legislation, is the federal hospital.

Since the budget review hospitals include general hospitals which are designed essentially for acute or short-term care; special hospitals; and chronic hospitals which are, of course, designed for long-term care, it was considered that a more accurate picture of hospital utilization data would be obtained by considering certain categories of hospitals separately and for this reason certain data relates to budget review general hospitals, implying that the data relating to the special and chronic hospitals has been excluded from the other budget review hospital data. For purposes of the Annual Return, a "general" hospital is a hospital which provides for the treatment and care of all types of disease or at least a wide range of conditions; women's and children's hospitals are classified as general unless these hospitals restrict admissions to particular conditions of these types of patients.

Table I shows the number of hospitals and related facilities listed in the agreements with the provinces at December 31, 1959, by province. It will be noted that on that date there were 944 hospitals of all types participating in the hospital insurance program, of which the majority (754) were budget review hospitals.

Table II shows the number of beds and cribs set up on December 31, 1959, and the rate per thousand of the estimated population, by province. On this date nine provinces were participating in the hospital insurance program. On the basis of 920 hospitals of all categories reporting, there was a total of 81,135 beds and cribs set up on December 31, 1959, in these participating provinces. This gives a total rate for the nine provinces of 6.5 beds per thousand population. It will be noted, however, that there is a considerable variation between provinces, ranging from 4.0 in Newfoundland to 8.3 in Saskatchewan. The Alberta rate of 7.8 per thousand is also considerably above the national average of 6.5, while British Columbia, Manitoba, Ontario and Prince Edward Island are fairly close to the average. Nova Scotia and New Brunswick, like Newfoundland, are well below the average.

Table III shows the number of beds and cribs set up on December 31, 1959 by ownership of hospital, totalling 81,135 for the nine provinces then participating in the hospital insurance program. It highlights the predominance of budget review hospital beds and cribs set up. About seven-eighths of these beds and cribs, totalling 70,335, were in budget review hospitals. Over one-third of these (26,161) were owned by lay corporations while only somewhat fewer (22,585) were in hospitals operated by religious organizations. A slightly smaller number of beds (21,561) were in hospitals operated by provincial or municipal governments.

The distribution of budget review hospital beds varied considerably from province to province. The majority of beds in budget review hospitals in Prince Edward Island (403), Nova Scotia (1,062), Ontario (15,955), and British Columbia (5,833) are in voluntary hospitals operated by lay corporations. The majority of beds in New Brunswick (1,371) and Manitoba (2,228) are in religious hospitals while the largest number of hospital beds in Saskatchewan (4,415) and Alberta (4,318) are in municipal hospitals. In Newfoundland, the majority of beds (1,037) of this category are in hospitals operated by the provincial government. This varied ownership pattern has long been a characteristic feature of hospital organization in Canada.

A relatively small percentage (3.3) of the beds and cribs set up (2,667) are in contract hospitals, and the vast majority of these are in Ontario (2,141). About 10% of the total are beds and cribs set up in federal hospitals (8,133).

TABLE I
NUMBER OF HOSPITALS AND RELATED FACILITIES LISTED IN
HOSPITAL INSURANCE AGREEMENTS, AT
DECEMBER 31, 1959, BY PROVINCE

PROVINCE	Budget Review	Contract	Federal Government	Total
Newfoundland	26	15	1	42
Prince Edward Island	10	1	—	11
Nova Scotia	48	1	1	50
New Brunswick	36	1	2	39
Ontario	207	92	12	311
Manitoba	77	8	6	91
Saskatchewan	154	10	6	170
Alberta	110	4	7	121
British Columbia	86	17	6	109
Total (9 Provinces)	754	149	41	944

TABLE II
NUMBER OF BEDS AND CRIBS SET UP ON DECEMBER 31, 1959,
AND RATE PER 1,000 ESTIMATED POPULATION,⁽¹⁾ IN
HOSPITALS LISTED IN HOSPITAL INSURANCE AGREEMENTS,
BY PROVINCE

PROVINCE	No. of Hospitals Reporting	Beds and Cribs Set up on December 31	Rate per 1,000 Estimated Population ⁽¹⁾
Newfoundland	40	1,811	4.0
Prince Edward Island	9	643	6.2
Nova Scotia	48	3,991	5.6
New Brunswick	38	3,431	5.8
Ontario	304	37,690	6.2
Manitoba	90	6,193	6.9
Saskatchewan	165	7,540	8.3
Alberta	118	9,828	7.8
British Columbia	108	10,008	6.3
Total (9 Provinces)	920	81,135	6.5

⁽¹⁾ Based on Intercensal Population Estimates as at January 1, 1960, Dominion Bureau of Statistics, Ottawa.

TABLE III

NUMBER OF BEDS AND CRIBS SET UP ON DECEMBER 31, 1959, BY OWNERSHIP IN
HOSPITALS LISTED IN HOSPITAL INSURANCE AGREEMENTS, BY OWNERSHIP AND
BY PROVINCE

PROVINCE	No. of Hospitals Reporting	Budget Review Hospitals						Contract Hospitals	Federal Government Hospitals	Total Beds and Cribs Set up
		Lay Corporation	Religious Body	Municipal Government	Provincial Government	Industrial	Total Budget Review			
Newfoundland	40	202	312	25	1,037	—	1,576	192	43	1,811
Prince Edward Island	9	403	198	12	30	—	643	—	—	643
Nova Scotia	48	1,062	971	902	598	—	3,533	—	458	3,991
New Brunswick	38	941	1,371	624	69	—	3,005	—	426	3,431
Ontario	304	15,955	10,224	5,737	87	—	32,003	2,141	3,546	37,690
Manitoba	90	1,591	2,228	1,210	157	28	5,214	76	903	6,193
Saskatchewan	165	31	1,835	4,415	1,078	—	7,359	37	144	7,540
Alberta	118	143	3,210	4,318	1,051	—	8,722	20	1,086	9,828
British Columbia	108	5,833	2,236	185	26	—	8,280	201	1,527	10,008
Total (9 Provinces)	920	26,161	22,585	17,428	4,133	28	70,335	2,667	8,133	81,135

Table IV shows the number and percentage distribution of beds and cribs set up on December 31, 1959, by type of bed and by size of hospital, in 696 budget review general hospitals. It will be noted that nearly two-thirds of all beds in hospitals of all size groups, are beds for medicine and surgery (40,087).

The number of obstetric beds (9,388) is approximately one-sixth of all the beds in small and medium size hospitals and this percentage appears to become smaller in inverse proportion to the size of the hospital.

The distribution pattern of paediatric beds (8,483) differs in that these are more numerous in the medium size hospitals in the range of 50 to 300 beds while a lower percentage of the total will be found in the small and the large size hospitals.

Not unexpectedly, the larger hospitals account for the higher percentages of other beds (6,141) since it is in these hospitals that many specialized services and facilities for particular classes of patients are to be found.

Table V shows the percentage of standard ward beds in relation to the total number of beds set up on December 31, 1959 in reporting hospitals, by ownership and by province. It will be noted that the provincial (81.3) and municipal (73.1) government hospitals show a substantially higher proportion of standard ward beds than that shown by religious (61.1) and lay corporation (62.1) hospitals. The percentage of standard ward beds in contract hospitals (63.0), follows closely the percentage shown for the religious and lay corporation hospitals.

The aggregate picture in nine provinces for the voluntary lay corporations, religious groups and contract hospitals is very similar for each group showing about three standard ward beds for every two beds in preferred accommodation. It will be noted, however, that the picture for the voluntary and contract hospitals varied considerably from one province to another. Generally there was a higher proportion of standard ward accommodation in the four western provinces and in Newfoundland, in which provinces (except Manitoba) public hospital programs had been in operation for some years.

It will be noted that there was no preferred accommodation in federal government hospitals.

The percentage of standard ward bed accommodation in nine provinces on December 31, 1959 was 68.9%.

TABLE IV
NUMBER AND PERCENTAGE DISTRIBUTION OF BEDS AND CRIBS SET UP ON DECEMBER 31, 1959,
IN BUDGET REVIEW GENERAL HOSPITALS
BY TYPE OF BED AND SIZE OF HOSPITAL
Nine Provinces, (excluding Quebec)

Type of Bed	Bed-size of Hospital								Total	
	1-9	10-24	25-49	50-99	100-199	200-299	300-499	500-999		1000 and over
	Number									
Medicine-Surgery	376	2,730	4,449 ⁽¹⁾	4,806	7,806	3,631	6,151	6,981	3,157	40,087
Obstetric	105	658	1,153 ⁽¹⁾	1,312	2,213	1,009	1,401	1,076	461	9,388
Paediatric	63	552	840	1,159	2,229	976	1,270	1,030	364	8,483
Other ⁽²⁾	23	130	239	407	675	344	1,535	1,776	1,012	6,141
Total (9 Provinces)	567	4,070	6,681	7,684	12,923	5,960	10,357	10,863	4,994	64,099
Percent										
Medicine-Surgery	66.3	67.1	66.6 ⁽¹⁾	62.5	60.4	60.9	59.4	64.3	63.2	62.5
Obstetric	18.5	16.2	17.2 ⁽¹⁾	17.1	17.1	16.9	13.5	9.9	9.2	14.6
Paediatric	11.1	13.6	12.6	15.1	17.2	16.4	12.3	9.5	7.3	13.2
Other ⁽²⁾	4.1	3.2	3.6	5.3	5.2	5.8	14.8	16.3	20.3	9.6
Total (9 Provinces)	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0
Number of Hospitals Reporting	57	210	170	100	88	25	26	16	4	696

(1) Includes five hospitals for which obstetrical beds have not been segregated from medicine and surgery beds in British Columbia.

(2) Including orthopaedic, psychiatric, tuberculosis, isolation and long term beds, etc.

TABLE V

STANDARD WARD BEDS AS A PERCENT OF TOTAL ACCOMMODATION BEDS SET UP ON DECEMBER 31, 1952,
IN HOSPITALS LISTED IN HOSPITAL INSURANCE AGREEMENTS, BY PROVINCE

PROVINCE	No. of Hospitals Reporting	Budget Review Hospitals					Contract Hospitals	Federal Government Hospitals	Total
		Lay Corporation	Religious Body	Municipal Government	Provincial Government	Industrial			
Newfoundland	38 (1)	85.6	62.5	72.0	91.0	-	92.7	100.0	85.6
Prince Edward Island	9	57.0	50.0	75.0	100.0	-	-	-	57.2
Nova Scotia	48	67.7	52.8	66.6	64.4	-	-	100.0	67.1
New Brunswick	37	63.1	54.5	61.1	100.0	-	-	100.0	64.6
Ontario	303 (2)	56.7	55.1	56.4	64.4	-	56.4	100.0	60.3
Manitoba	86	64.4	72.6	91.8	-	85.7	89.0	100.0	78.7
Saskatchewan	163 (2)	93.5	73.5	80.9	92.3	-	100.0	100.0	81.2
Alberta	118	99.3	68.2	85.3	81.4	-	100.0	100.0	81.2
British Columbia	106 (2)	74.7	67.6	70.3	100.0	-	87.1	100.0	77.2
Total (9 Provinces)	908	62.1	61.1	73.1	81.3	85.7	63.0	100.0	68.9

(1) Excludes two hospitals in Newfoundland where "Plan hospital" was not segregated from parent institution.

(2) Excludes one hospital in Ontario and one in British Columbia for which beds were not appropriately segregated and two hospitals in Saskatchewan for which data were not reported.

Table VI shows the total patient days during the year and the insured patient days during the year as well as the insured patient days as a percentage of the total patient days and the rate per thousand of insured population for adults and children in all hospitals by province for the seven provinces participating in the hospital insurance program during the whole of the calendar year 1959. It will be noted that the volume of hospital days per thousand population varied considerably from province to province, in much the same way as the distribution per thousand population of beds set up as shown in Table II. The rate per thousand population for the seven provinces was 1,986.6 days, a rate which is considerably exceeded by both Saskatchewan (2,294.9) and Alberta (2,256.5). Newfoundland (1,258.4) and Nova Scotia (1,572.4) were well below the average while British Columbia (1,913.3), Manitoba (1,897.6) and Ontario (1,884.8) were fairly close to the average for participating provinces.

With regard to insured patient days as a percentage of total patient days, it is interesting to note that both Newfoundland (93.4) and Saskatchewan (94.3) were well above the average of 87.1% of the overall volume of care. An interesting feature of the insured days as a percentage of the total volume of care is the similarity shown in British Columbia (85.8), Alberta (84.9), Manitoba (85.8) and Ontario (86.3).

The high proportion of insured days in Saskatchewan and Newfoundland would seem to reflect the small number of federal hospital beds (Table III) and low incidence of Workmen's Compensation cases in these relatively non-industrialized provinces.

Apparently the voluntary element in the coverage of residents in Ontario did not substantially change the experience in that province which reported 86.3% insured days as a percentage of the total volume of hospital care in the province during 1959.

Table VII shows the number and percentage distribution of total patient days by status of hospital for adults and children by province in those provinces which participated in the hospital insurance program throughout the calendar year 1959. As might be expected, the number of patient days bear a close relationship to the number of hospital beds set up as shown in Table II except that the number of beds set up is shown for the nine provinces which were operating hospital insurance programs by the end of the year, while the present table is limited to those provinces which participated during the full calendar year. The relevant significance of different categories of hospitals, budget review, contract and federal hospitals are shown in the total volume of hospital care. The budget review hospitals accounted for 87.7% of the total patient days in the seven provinces. Only 8.7% of all hospital care was in budget review hospitals other than general hospitals in all the provinces. The bulk of this category of care appeared to be concentrated in four of the seven provinces (Ontario, Alberta, Saskatchewan and Manitoba, in that order). These hospitals include the chronic and long-term care institutions and the availability of such accommodation in Ontario accounts for the relatively high percentage (11.7) of hospital care.

Only 3% of the total patient days was in contract hospitals. The bulk of these was in Newfoundland where the International Grenfell Association hospitals were listed as contract hospitals in 1959.

Federal government hospitals accounted for only 9.5% of the total in the seven participating provinces.

Table VIII shows the distribution of total patient days in budget review hospitals in the seven provinces which participated in the hospital insurance program throughout the calendar year 1959, between standard ward, semi-private and private wards and the percentage of total patient days in each of these categories of accommodation. This table is related closely to Table V in which the number of beds set up in budget review hospitals is shown.

It will be noted that 69.7% of care was provided in standard ward accommodation, while 22.2% was semi-private and only 8.1% private. An examination of the individual provinces reveals considerable variety from one province to another. It is interesting to note that the provinces showing the highest percentage of total patient days in standard ward accommodation are those provinces which had been operating provincial hospital insurance plans prior

to the inauguration of the federal-provincial program. Thus, the percentage is highest in Newfoundland (88.1), Saskatchewan (86.9), Alberta (84.2) and British Columbia (79.7). The lowest proportion of standard ward care was in Ontario (58.4), which along with Nova Scotia (67.6) inaugurated hospital insurance programs on January 1, 1959.

For the most part the relative utilization of semi-private and private accommodation is in inverse proportion to that shown for standard ward. It is interesting to note that Nova Scotia shows the highest percentage for private accommodation (14.0) while in Ontario almost one-third of all hospital care was provided in semi-private accommodation (32.0).

Table IX shows the number of total patient days in contract hospitals in the seven provinces which participated in the hospital insurance program throughout the calendar year 1959, in standard ward, semi-private and private wards and the percentage of total patient days in each of these categories of accommodation.

It will be noted that practically all the patient days for contract hospitals was provided in standard ward accommodation, in nearly all of the provinces with the exception of Ontario in which the 43.8% standard ward utilization had the effect of lowering the overall average to 52.7%. It should be noted, however, that the majority of contract hospitals in 1959 were situated in that province.

This table bears a close relationship also to Table V in which the number of beds in contract hospitals is shown.

TABLE VII

NUMBER AND PERCENTAGE DISTRIBUTION OF TOTAL PATIENT-DAYS DURING YEAR,
ADULTS AND CHILDREN, IN HOSPITALS LISTED IN HOSPITAL INSURANCE AGREEMENTS,
BY STATUS OF HOSPITAL, BY PROVINCE, 1959

PROVINCE	No. of Hospitals Reporting	Insurance Status of Hospital				
		All Hospitals	Budget Review		Contract	Federal Government
			General	Other		
Number						
Newfoundland	40	565,034	463,810	—	98,782	2,442
Nova Scotia	48	1,125,804	967,091	35,108	—	123,605
Ontario	298	11,218,133	8,364,024	1,318,531	503,989	1,031,589
Manitoba	86	1,691,418	1,310,736	141,193	13,462	226,027
Saskatchewan	163 ⁽¹⁾	2,114,029	1,879,867	185,528	4,619	44,015
Alberta	119	2,784,937	2,234,105	251,752	2,890	296,190
British Columbia	104 ⁽¹⁾	2,838,839	2,390,630	16,580	43,691	387,938
Total (7 Provinces)	858	22,338,194	17,610,263	1,948,692	667,433	2,111,806
Percent						
Newfoundland		100.0	82.1	—	17.5	0.4
Nova Scotia		100.0	85.9	3.1	—	11.0
Ontario		100.0	74.6	11.7	4.5	9.2
Manitoba		100.0	77.5	8.3	0.8	13.4
Saskatchewan		100.0	88.9	8.8	0.2	2.1
Alberta		100.0	80.2	9.0	0.1	10.6
British Columbia		100.0	84.2	0.6	1.5	13.7
Total (7 Provinces)		100.0	78.8	8.7	3.0	9.5

(1) Excludes two hospitals in Saskatchewan and three in British Columbia for which data were not reported.

TABLE VIII

NUMBER OF ADULT AND CHILD PATIENT-DAYS IN STANDARD, SEMI-PRIVATE AND PRIVATE
WARDS, AND PERCENTAGES OF TOTAL PATIENT-DAYS IN BUDGET REVIEW HOSPITALS, BY
PROVINCE, 1959

PROVINCE	No. of Hospitals Reporting	Number of Patient-Days (Adults and Children)				Percentage of Total Patient-Days		
		Standard	Semi-Private	Private	Total Patient-Days	Standard	Semi-Private	Private
Newfoundland	25	408,579	35,231	20,000	463,810	88.1	7.6	4.3
Nova Scotia	47	677,507	184,435	140,257	1,002,199	67.6	18.4	14.0
Ontario	206	5,653,916	3,100,284	928,355	9,682,555	58.4	32.0	9.6
Manitoba	74 (1)	1,093,909	270,382	87,638	1,451,929	75.3	18.6	6.0
Saskatchewan	151	1,794,291	155,475	115,629	2,065,395	86.9	7.5	5.6
Alberta	108	2,092,035	282,203	111,619	2,485,857	84.2	11.4	4.5
British Columbia	83 (2)	1,864,507	305,704	170,150	2,340,361	79.7	13.1	7.3
Total (7 Provinces)	694	13,584,744	4,333,714	1,573,648	19,492,106	69.7	22.2	8.1

(1) Excludes three hospitals in Manitoba where "Plan hospital" was not segregated from parent institution.

(2) Excludes three hospitals in British Columbia for which data were not appropriately segregated.

TABLE IX

NUMBER OF ADULT AND CHILD PATIENT-DAYS IN STANDARD, SEMI-PRIVATE AND PRIVATE WARDS,
AND PERCENTAGES OF TOTAL PATIENT-DAYS IN CONTRACT HOSPITALS, BY PROVINCE, 1959

PROVINCE	No. of Hospitals Reporting	Number of Patient-Days (Adults and Children)				Percentage of Total Patient-Days		
		Standard	Semi-Private	Private	Total	Standard	Semi-Private	Private
Newfoundland	12	41,767	1,723	—	43,490	96.0	4.0	—
Nova Scotia	—	—	—	—	—	—	—	—
Ontario	85 (1)	220,888	249,311	33,790	503,989	43.8	49.5	6.7
Manitoba	6	13,462	—	—	13,462	100.0	—	—
Saskatchewan	6 (1)	4,619	—	—	4,619	100.0	—	—
Alberta	2	2,890	—	—	2,890	100.0	—	—
British Columbia	16	38,876	2,278	2,537	43,691	89.0	5.2	5.8
Total (7 Provinces)	127	322,502	253,312	36,327	612,141	52.7	41.4	5.9

(1) Excludes one hospital in Ontario and two in Saskatchewan which did not report data.

Table X shows the percentage distribution of adult and child separations in 656 budget review general hospitals, by length of stay and by province. The percentage of separations of up to three days since admission, appears to be of some significance since it accounts for almost one-third of the total. In Ontario alone it will be noted that 11.4% of separations related to a stay of only one day. The percentage for two days is higher in the western provinces than in the east. It is interesting to note that the percentage of separations for a total of up to three days is lowest in Newfoundland (24.5%) and Nova Scotia (27.6%), the two provinces in which insured out-patient services were more available than in other participating provinces. On the whole, however, there is a remarkable similarity between the provinces with regard to these short stay cases.

There is a remarkable similarity too in provincial experience in the four to seven day category and in the eight to ten-day category in which the average percentages are 34.4% and 12.8% respectively.

It will be noted that in the 30-day or more category the highest percentage is reported in Newfoundland (7.1%) a province in which there are no chronic long-term hospitals. The average for this category of 5.1% was also exceeded in Ontario, Saskatchewan and British Columbia.

Table XI shows the average length of stay of adults and children separations since admission, by bed size of hospital and by province for budget review general hospitals and for budget review chronic hospitals.

For budget review general hospitals, it will be noted that with the exception of Newfoundland the average length of stay varied from 9.1 days to 9.9 days. The average in Newfoundland (11.7) was affected by one general hospital in which the average stay was 26.9 days. As mentioned in connection with Table X, Newfoundland has no separate chronic hospitals listed in the agreement. It will be noted that the average length of stay in smaller hospitals is shorter than the stay in the larger hospitals, reflecting the limited facilities available in the smaller hospitals. It would appear that with few exceptions the length of stay increases in proportion to bed size of hospital. Thus, for example, in Ontario the smallest category of hospital shows an average length of stay of 5.8 days, a figure which increases in all but one instance with the increase in bed size, up to an average of 13.6 days for the category of 1,000 beds and over.

The average length of stay in chronic hospitals ranged from 20.8 days in Nova Scotia to 336.9 days in Alberta. In Ontario where the highest number of budget review chronic hospitals are situated, the average was 246.3 days. This length of stay is characteristic of chronic hospitals generally.

Tables XII A and XII B show the percentage occupancy of total accommodation, and of standard ward and preferred accommodation, beds and cribs in budget review general hospitals by size of hospital and by province, with respect to the nine provinces which were participating in the hospital insurance program by the end of 1959.

It will be noted that the overall occupancy in 695 hospitals of all sizes was 79.3%. The experience with regard to occupancy appears to parallel that of length of stay in that it appears to increase proportionately to the increasing size of the hospital. The range extended from 54.6% occupancy in the one-to-nine bed category, to a high of 88.9% in the 1,000 beds and over category. The highest occupancy rate was Ontario (81.7%) while the lowest was Prince Edward Island (68.6%). Prince Edward Island did not enter the hospital insurance program, however, until the latter part of 1959 and it may be of more interest, therefore, to know that Saskatchewan had the second lowest occupancy rate (75.4%).

The percentage occupancy for standard ward accommodation was 83.3% in all budget review general hospitals compared to 72.1% for preferred accommodation.

The pattern of higher levels of occupancy in larger hospitals than in small hospitals was characteristic of both standard ward and preferred accommodation.

TABLE X

NUMBER AND PERCENTAGE DISTRIBUTION OF ADULT AND
CHILD SEPARATIONS, BY LENGTH OF STAY FROM DATE
OF ADMISSION AND BY PROVINCE, BUDGET REVIEW
GENERAL HOSPITALS, 1959

Length of Stay Since Admission	Number of Adult and Child Separations							
	Newfoundland	Nova (1) Scotia	Ontario (1)	Manitoba	Saskatchewan (3)	Alberta	British Columbia	Total (7 Provinces)
1 day	2,391	9,147	87,348	11,421	14,557	21,014	16,438	162,316
2 days	3,250	9,659	69,865	19,605	21,182	29,573	33,267	186,410
3 days	3,859	8,386	57,156	12,960	16,920	22,985	21,412	143,687
4-7 days	13,082	33,122	267,296	50,736	64,564	85,016	80,775	594,591
8-10 days	4,521	13,189	93,434	17,805	24,883	33,870	33,603	221,305
11-29 days	8,997	20,568	147,774	27,372	37,497	41,819	47,164	331,191
30 or more	2,747	4,664	41,439	6,457	10,091	9,837	13,074	88,309
Total	38,856 (2)	98,735	764,312	146,356	189,703	244,114	245,733	1,727,809
Percentage Distribution of Adult and Child Separations								
1 day	6.2	9.3	11.4	7.8	7.7	8.6	6.7	9.4
2 days	8.4	9.8	9.1	13.4	11.2	12.1	13.5	10.8
3 days	9.9	8.5	7.5	8.8	8.9	9.4	8.7	8.3
4-7 days	33.6	33.5	35.0	34.7	34.0	34.8	32.9	34.4
8-10 days	11.6	13.4	12.2	12.2	13.1	13.9	13.7	12.8
11-29 days	23.1	20.8	19.3	18.7	19.8	17.1	19.2	19.2
30 or more	7.1	4.7	5.4	4.4	5.3	4.0	5.3	5.1
Total	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0
No. of Hospitals Reporting	25	44	182	73	148	99	85	656

(1) Based upon claims processed during period January 1 to December 31, 1959.

(2) Excludes 55 patient days unspecified as to length of stay for 6 hospitals in Newfoundland.

(3) For most Saskatchewan hospitals the reported distribution of separations included only persons insured under the Provincial Plan.

TABLE XI

AVERAGE LENGTH OF STAY FROM DATE OF ADMISSION FOR
ADULTS AND CHILDREN SEPARATED FROM HOSPITAL
DURING YEAR (DISCHARGES AND DEATHS), BY BED-SIZE
OF HOSPITAL AND BY PROVINCE, BUDGET REVIEW
GENERAL AND CHRONIC HOSPITALS, 1959

PROVINCE	No. of Hospitals Reporting	Bed-Size of Hospital									Total
		1- 9	10- 24	25- 49	50- 99	100- 199	200- 299	300- 499	500- 999	1000 and Over	
Budget Review General Hospitals											
Newfoundland	25	5.5	7.0	7.3	12.1	9.9	—	26.9	—	—	11.7
Nova Scotia ⁽¹⁾	44	7.3	5.8	7.8	9.3	10.2	9.6	—	11.9	—	9.4
Ontario ⁽¹⁾	182	5.8	7.3	8.9	9.8	8.9	8.9	9.9	11.3	13.6	9.9
Manitoba	73	8.0	7.0	7.2	8.2	9.4	8.0	9.4	11.2	—	8.9
Saskatchewan ⁽²⁾	148	7.0	7.4	7.8	8.3	10.5	13.5	12.6	14.8	—	9.9
Alberta	99	5.4	6.8	7.1	7.8	9.0	8.5	9.3	10.1	16.5	9.1
British Columbia	85	—	7.2	7.7	8.1	9.1	7.6	11.2	11.4	14.3	9.7
Total (7 Provinces)	656	7.0	7.1	7.8	8.8	9.2	9.2	10.5	11.4	14.3	9.7
Budget Review Chronic Hospitals											
Newfoundland	—	—	—	—	—	—	—	—	—	—	—
Nova Scotia ⁽¹⁾	1	—	—	—	20.8	—	—	—	—	—	20.8
Ontario ⁽¹⁾	21	—	—	174.3	112.5	205.2	158.2	628.2	410.6	—	246.3
Manitoba	1	—	—	—	—	—	—	—	106.7	—	106.7
Saskatchewan ⁽²⁾	—	—	—	—	—	—	—	—	—	—	—
Alberta	9	—	—	149.1	405.6	—	464.3	—	—	—	336.9
British Columbia	—	—	—	—	—	—	—	—	—	—	—
Total (7 Provinces)	32	—	—	163.6	143.9	205.2	182.4	628.2	217.7	—	217.5

(1) Based upon claims processed during period January 1 to December 31, 1959.

(2) Based upon figures provided by Provincial Plan for most Saskatchewan hospitals.

TABLE XII A

PERCENTAGE OCCUPANCY (1) OF TOTAL ACCOMMODATION BEDS
AND CRIBS SET UP IN BUDGET REVIEW GENERAL HOSPITALS,
BY BED-SIZE OF HOSPITAL AND BY PROVINCE, 1959

PROVINCE	No. of Hospitals Reporting	Bed-Size of Hospital									Total
		1- 9	10- 24	25- 49	50- 99	100- 199	200- 299	300- 499	500- 999	1000 and Over	
Total Accommodation											
Newfoundland	25	38.9	64.1	61.0	60.7	96.7	—	92.6	—	—	80.6
Prince Edward Island	8	—	63.8	61.3	—	70.3	—	—	—	—	68.6
Nova Scotia	43	52.6	56.1	75.1	76.7	78.6	81.3	—	89.1	—	78.6
New Brunswick	32 ⁽²⁾	62.6	75.5	63.5	74.7	76.7	77.6	—	81.1	—	76.3
Ontario	182	32.5	62.6	68.5	73.9	80.9	78.1	85.9	86.6	88.8	81.7
Manitoba	73	66.9	62.4	68.1	72.7	73.0	79.1	80.8	90.2	—	77.7
Saskatchewan	148	55.8	64.3	70.2	79.3	76.0	82.6	88.3	81.8	—	75.4
Alberta	99	45.1	60.1	67.6	65.9	78.9	66.2	88.7	87.5	86.7	76.7
British Columbia	85	—	63.2	68.3	74.1	79.1	57.9	89.3	88.0	90.9	79.7
Total (9 Provinces)	695	54.6	63.4	68.7	72.8	79.7	77.6	86.9	86.6	88.9	79.3

(1) Days as percentage of 365, times beds set up on December 31.

(2) Excluding one hospital in New Brunswick which did not report data.

TABLE XII B

PERCENTAGE OCCUPANCY ⁽¹⁾ OF STANDARD WARD AND
PREFERRED ACCOMMODATION ⁽²⁾ BEDS AND CRIBS
SET UP IN BUDGET REVIEW GENERAL HOSPITALS,
BY BED-SIZE OF HOSPITAL AND BY PROVINCE, 1959

PROVINCE	No. of Hospitals Reporting	Bed-Size of Hospital									All B.R. Hospitals
		1- 9	10- 24	25- 49	50- 99	100- 199	200- 299	300- 499	500- 999	1000 and Over	
Standard Ward											
Newfoundland	25	38.9	70.1	67.1	61.3	103.8	—	96.5	—	—	84.2
Prince Edward Island	8	—	67.5	33.7	—	83.8	—	—	—	—	75.8
Nova Scotia	43	52.3	52.2	91.7	82.0	88.1	86.7	—	89.0	—	85.1
New Brunswick	32 ⁽⁴⁾	68.1	76.2	69.8	97.8	76.8	71.8	—	67.7	—	73.7
Ontario	182	42.4	68.9	73.1	79.8	83.2	80.3	92.5	86.0	90.8	84.3
Manitoba	73 ⁽⁴⁾	67.4	63.3	73.6	81.8	88.1	67.7	80.9	89.1	—	78.0
Saskatchewan	148 ⁽⁴⁾	56.9	68.5	80.4	93.8	88.1	94.0	92.4	81.4	—	81.4
Alberta	99	45.1	64.3	72.8	75.2	91.5	79.1	99.1	89.5	87.9	82.0
British Columbia	82 ⁽⁴⁾	—	67.2	75.8	87.1	90.0	71.3	94.9	95.9	98.1	87.9
Total (9 Provinces)	692	57.1	66.8	75.4	81.5	86.2	79.8	93.4	86.1	92.0	83.3
Preferred Accommodation (2) (3)											
Newfoundland		—	11.3	5.4	55.6	81.6	—	52.9	—	—	61.5
Prince Edward Island		—	58.4	111.6	—	52.2	—	—	—	—	57.6
Nova Scotia		—	69.7	46.3	68.0	63.4	74.7	—	89.3	—	67.7
New Brunswick ⁽⁴⁾		50.7	73.9	51.6	56.3	90.8	84.4	—	101.5	—	79.8
Ontario		21.0	50.5	62.4	66.9	78.4	75.7	78.9	87.3	85.6	78.0
Manitoba ⁽⁴⁾		0.0	34.2	28.8	43.1	40.1	96.5	80.5	91.9	—	76.4
Saskatchewan ⁽⁴⁾		22.6	81.7	43.1	37.6	44.6	56.3	73.8	83.7	—	52.5
Alberta		—	16.4	33.1	30.7	52.0	27.1	70.3	80.6	81.2	57.6
British Columbia ⁽⁴⁾		—	16.2	36.9	38.7	52.7	37.6	68.9	79.5	78.3	59.2
Total (9 Provinces)		25.4	41.9	50.2	55.0	70.3	74.8	77.4	88.2	82.9	72.1

(1) Days as percentage of 365, times beds set up on December 31.

(2) Including private and semi-private beds and cribs set up on December 31.

(3) Excluding hospitals for which preferred accommodation not applicable.

(4) Excluding one hospital in New Brunswick and Manitoba, four hospitals in Saskatchewan and three in British Columbia for which data were not appropriately reported.

Table XIII shows the number of in-patient surgical operations and the number of in-patient radiographic examinations in budget review hospitals in the seven provinces participating in the hospital insurance program throughout the calendar year 1959. The table also shows the average number of these procedures per 100 admissions to the reporting hospitals.

It will be noted that the rate of surgical operations was lower in such less industrialized provinces as Alberta, Saskatchewan and Newfoundland than in provinces with urban centres and a relatively high proportion of beds in large hospitals.

The ratio of radiographic examinations appeared to be higher in the western provinces than in Ontario, Nova Scotia and Newfoundland, although there is reason to believe that reporting procedures in this regard, were not uniform throughout the country.

On balance it would appear that two out of every five admissions are for surgical operations, and that two radiographic examinations are made for every three admissions.

Table XIV shows the number of persons employed on a full-time basis or in training in the hospital for certain selected professional categories in the seven provinces which participated throughout the year 1959, as at December 31. It will be noted that the number of hospitals reporting varies with the particular group under consideration.

The first line of Table K shows the gross operating expenses for the "Budget Review" hospitals. These operating expenses were analysed from the financial returns prepared by the hospitals, and this analysis is shown in Table XV.

The total revenue fund expense in Table XV does not correspond exactly with the amounts shown on the first line of Table K because reports were not available from some of the hospitals, and in many cases the provinces, in making the year-end assessment of the provincial returns to determine the approved costs, found it necessary to make certain adjustments. However, the variances are not significant.

In Tables XVI, XVII and XVIII the costs shown in Table XV are expressed in three different ways:

In Table XVI, as costs per patient day

In Table XVII as per capita costs

In Table XVIII as percentages of total costs.

The costs per patient day shown in Table XVI were calculated by dividing the amounts shown in Table XV by the total patient days for adults and children. This is the normally accepted method for expressing hospital costs per patient day.

It will be observed that the cost of salaries and wages varied from a low of \$9.36 for Newfoundland to a high of \$14.72 in British Columbia, the average for the seven provinces being \$12.67. In Newfoundland a number of hospitals are operated by the provincial government and in these hospitals part of the services are purchased from the government and thus are reported as, "Other Supplies and Expense" in total, instead of being split among the various components. This factor probably contributed to the low figure for gross salaries and wages in Newfoundland.

There is a surprisingly small variation in the cost of drugs and medical supplies which varies from a low of \$1.47 in Saskatchewan to a high of \$1.85 in Newfoundland, the average for the seven provinces being \$1.61.

In Newfoundland the raw food cost was not available as a separate item, but this cost was included in the costs of "Other Supplies and Expense". The raw food cost includes the cost of food supplied to staff, in-patients and visitors, and consequently the variations in raw food costs per patient day probably reflect variations in the number of hospital staff that take their meals at the hospitals, rather than variations in the cost of food per meal served.

The main items comprising "Other Supplies and Expense" are fuel, electricity, water, insurance, replacements of bedding and linen, laundry supplies, housekeeping and cleaning supplies, repairs to buildings, repairs to furniture and equipment, maintenance of physical plant, printing, postage, stationery, office supplies, and telephone. The figure of \$5.58 in Newfoundland is due to the inclusion of the raw food cost and the cost of the salary component of purchased services.

The main components of "Other Revenue Fund Expense" are depreciation and interest.

TABLE XIII
NUMBER OF IN-PATIENT SURGICAL OPERATIONS, IN-PATIENT RADIOGRAPHIC EXAMINATIONS⁽¹⁾
AND AVERAGE PER 100 ADMISSIONS IN BUDGET REVIEW HOSPITALS, BY PROVINCE, 1959

PROVINCE	In-Patient Surgical Operations			In-Patient Radiographic Examinations ⁽¹⁾				
	No. of Hospitals Reporting In-Patient Operations	No. of In-Patient Surgical Operations	No. of Admissions in Hospitals Reporting Service	Average Per 100 Admissions	No. of Hospitals Reporting In-Patient Radiographic Examinations	No. of In-Patient Radiographic Examinations	No. of Admissions in Hospitals Reporting Service	Average Per 100 Admissions
Newfoundland	25	14,545	38,916	37.4	23	16,512	37,348	44.2
Nova Scotia	35(2)	40,731	92,913	43.8	42	65,349	101,764	64.2
Ontario	182(2)	369,087	826,313	44.7	188	500,831	830,878	60.3
Manitoba	71(2)(3)	57,843	143,018	40.4	62(3)	106,856	127,664	83.7
Saskatchewan	137(2)	67,672	186,741	36.2	146	181,384	188,103	96.4
Alberta	100	91,750	245,738	37.3	89	149,726	219,722	68.1
British Columbia	83(2)	117,297	244,325	48.0	85	165,499	245,794	67.3
Total (7 Provinces)	633	758,925	1,777,964	42.6	635	1,186,157	1,751,273	67.7

(1) Excluding routine admission chest x-ray and fluoroscopic examinations.

(2) Excluding two hospitals in Nova Scotia, one in Ontario, two in Manitoba, three in Saskatchewan and one in British Columbia for which no distribution between in-patients and out-patients is provided for operations reported.

(3) Excluding three hospitals in Manitoba for which the "Plan Hospital" was not segregated from parent institution.

TABLE XIV
NUMBER OF PERSONS EMPLOYED FULL-TIME OR IN TRAINING FOR SELECTED PROFESSIONAL CATEGORIES, IN HOSPITALS COVERED UNDER PROVINCIAL AGREEMENTS BY PROVINCE, AS AT DECEMBER 31, 1959.

Employment Category	Number of Full-time Employees							Total (Provinces)
	Newfoundland(1)	Nova Scotia	Ontario(2)	Manitoba(1)	Saskatchewan	Alberta	British Columbia(2)	
Total Full-time Employees	38 2,552	48 6,110	296 57,970	86 8,931	153 9,606	116 12,575	105 13,663	847 111,407
Graduate Nurses (Including Supervisors)	36 375	48 1,425	293 12,046	95 1,557	156 1,970	115 3,054	103 3,638	336 4,065
Nursing Auxiliaries	35 430	42 720	280 12,592	80 2,142	151 1,971	110 2,504	93 2,451	791 22,860
Dietitians	6 9	16 35	112 274	13 35	13 22	29 58	32 101	221 534
Medical Record Librarians	3 6	23 37	121 200	14 17	21 31	38 44	38 51	253 386
Laboratory and Radiological Technicians	24 69	36 180	159 1,679	36(3) 217	98 353	72 340	64 489	489 3,327
Physiotherapists	2 5	6 21	76 236	9 24	11 31	18 53	17 53	139 423
Occupational Therapists	1 1	2 5	27 64	4 10	2 6	4 10	6 13	46 109
Pharmacists	3 5	12 13	86 183	12 29	14 28	14 30	13 33	154 321
Social Worker (Medical and other)	— —	4 9	23 69	4 13	4 9	6 8	7 30	48 136
Student Nurses-in-training (including affiliates-in)	4 491	14 1,035	54 6,397	9 1,161	13 1,333	13 1,638	9 1,439	113 13,494
Interns and Residents	1 19	6 90	53 942	8 192	5 90	7 130	7 220	91 1,689

(1) Excluding two hospitals in Newfoundland, three in Manitoba and three in British Columbia where "Plan Hospital" was not segregated from parent institution.

(2) Excluding eight hospitals in Ontario and one in British Columbia for which data not reported.

(3) Excluding eight hospitals in Manitoba for which laboratory and radiology departments are operated by provincial government employees.

TABLE XV
AMOUNT OF REVENUE FUND EXPENDITURES BY TYPE OF ACCOUNT, BUDGET REVIEW HOSPITALS,
BY PROVINCE, 1959

PROVINCE	Departmental Expense					Other Revenue Fund Expense	Total Revenue Fund Expense
	Salaries and Wages	Drugs, Medical and Surgical Supplies	Raw Food	Other Supplies and Expense	Total Departmental Expense		
Newfoundland	4,339,449	858,868	(1)	2,588,578	7,786,895	403,789	8,190,684
Nova Scotia	10,303,980	1,697,267	1,857,157	3,460,849	17,319,253	1,282,141	18,601,394
Ontario	127,037,774	15,679,671	13,255,054	26,478,784	182,451,283	13,969,537	196,420,820
Manitoba	18,468,991	2,559,996	1,848,872 (2)	4,106,195	26,984,054	2,024,202	29,008,256
Saskatchewan	24,104,136	2,768,998	2,396,209 (2)	5,441,916	34,711,259	2,589,879	37,301,138
Alberta	27,045,024	3,676,165	3,481,281 (2)	5,539,218	39,741,688	3,404,071	43,145,759
British Columbia	35,430,317	4,218,911	3,303,253	6,218,716	49,171,197	3,182,480	52,353,677
Total (7 Provinces)	246,729,671	31,459,876	26,141,826	53,834,256	358,165,629	26,856,099	385,021,728

(1) Food expenditures for Newfoundland not segregated from "Other Supplies and Expense".

(2) Excludes one hospital in Manitoba, Saskatchewan and Alberta where food expense not segregated.

TABLE XVI
REVENUE FUND EXPENDITURES PER PATIENT DAY (1) BY TYPE OF ACCOUNT, BUDGET REVIEW
HOSPITALS, BY PROVINCE, 1959

PROVINCE	Departmental Expense					Other Revenue Fund Expense	Total Revenue Fund Expense
	Gross Salaries and Wages	Drugs, Medical and Surgical Supplies	Raw Food	Other Supplies and Expense	Total Departmental Expense		
Newfoundland	9.36	1.85	(2)	5.58	16.79	0.87	17.66
Nova Scotia	10.28	1.63	1.85	3.45	17.28	1.28	18.56
Ontario	13.12	1.62	1.37	2.73	18.84	1.44	20.29
Manitoba	11.87	1.54	1.19 (2)	2.64	17.34	1.30	18.64
Saskatchewan	12.84	1.47	1.28 (2)	2.90	18.48	1.38	19.86
Alberta	10.88	1.48	1.40 (2)	2.23	15.99	1.37	17.36
British Columbia	14.72	1.75	1.37	2.58	20.43	1.32	21.75
Total (7 Provinces)	12.67	1.61	1.34	2.76	18.39	1.38	19.77

(1) Patient days during year for adults and children.

(2) See footnotes, Table XV.

Table XVII reflects the revenue fund expenditure on a per capita basis, that is, the hospital expenditures per person in the province. It will be observed that the variations in "Total Revenue Fund Expense" are more marked than on the patient day basis. This is because of the variation in the number of hospital days of care per thousand persons.

Table XVIII shows the percentage distribution of revenue fund expense, based on 100% in each province. For the seven provinces included in this table, the hospital dollar, on the average, was spent as follows:

Salaries and wages	\$.641
Drugs and medical supplies	\$.082
Raw food	\$.067
Other supplies and expense	\$.140
Other revenue fund expense	\$.070
	<hr/>
Total revenue fund expense	\$ 1.000
	<hr/> <hr/>

TABLE XVII
REVENUE FUND EXPENDITURES PER CAPITA⁽¹⁾ BY TYPE OF ACCOUNT, BUDGET REVIEW
HOSPITALS, BY PROVINCE, 1959

PROVINCE	Departmental Expense					Other Revenue Fund Expense	Total Revenue Fund Expense
	Gross Salaries and Wages	Drugs, Medi- cal and Surgical Supplies	Raw Food	Other Supplies and Expense	Total Depart- mental Expense		
Newfoundland	9.66	1.91	(2)	5.76	17.34	0.90	18.24
Nova Scotia	14.39	2.37	2.59	4.83	24.19	1.79	25.98
Ontario	21.34	2.63	2.23	4.45	30.65	2.35	33.00
Manitoba	20.87	2.89	2.09(2)	4.64	30.49	2.29	32.78
Saskatchewan	26.72	3.07	2.66(2)	6.03	38.48	2.87	41.35
Alberta	21.76	2.96	2.80(2)	4.46	31.97	2.74	34.71
British Columbia	22.57	2.69	2.10	3.96	31.32	2.03	33.35
Total (7 Provinces)	21.06	2.68	2.23	4.59	30.57	2.29	32.86

(1) Based on Intercensal Population Estimates as at June 1, 1959, Dominion Bureau of Statistics.

(2) See footnotes, Table XV.

TABLE XVIII
PERCENTAGE DISTRIBUTION OF REVENUE FUND EXPENDITURES BY TYPE OF ACCOUNT,
BUDGET REVIEW HOSPITALS, BY PROVINCE, 1959

PROVINCE	Departmental Expense					Other Revenue Fund Expense	Total Revenue Fund Expense
	Salaries and Wages	Drugs, Medical and Surgical Supplies	Raw Food	Other Supplies and Expense	Total Departmental Expense		
Newfoundland	53.0	10.5	(1)	31.6	95.1	4.9	100.0
Nova Scotia	55.4	8.1	10.0	18.6	93.1	6.9	100.0
Ontario	64.7	8.0	6.7	13.5	92.9	7.1	100.0
Manitoba	63.7	8.8	6.4 (1)	14.1	93.0	7.0	100.0
Saskatchewan	64.7	7.4	6.4 (1)	14.6	93.1	6.9	100.0
Alberta	62.7	8.5	8.1 (1)	12.8	92.1	7.9	100.0
British Columbia	67.7	8.0	6.3	11.9	93.9	6.1	100.0
Total 7 Provinces,	64.1	8.2	6.7	14.0	93.0	7.0	100.0

(1) See footnotes, Table XV.

CONCLUSION

In this Report developments in the hospital insurance and diagnostic services program are described and amendments to the agreements under the Hospital Insurance and Diagnostic Services Act are enumerated. Mention is made of the work of the Advisory Committee on Hospital Insurance and Diagnostic Services, its three subcommittees and the working parties. Figures are shown of the estimated number of insured persons as on March 31, 1961 and details are given of the federal payments made to the provinces during the fiscal year under review. Reference is also made to the final adjusted payment due to the provinces with respect to the calendar year 1959, although this adjusted payment was not made until after the end of the fiscal year under review.

For the first time, this Report includes a considerable amount of statistical and financial data derived from the Annual Return of Hospitals for the calendar year 1959. It will be noted that the statistical tables pertaining to these data have been numbered using Roman numerals instead of by alphabetic lettering which is used in the tables pertaining to the data for the fiscal year under review.

The Minister of National Health and Welfare expresses his appreciation to the provincial authorities and their staffs, to other federal departments, to the hospitals and the hospital associations, to other professional associations and to the medical profession in particular, for their co-operation in ensuring the success of the program. He also wishes to take this opportunity to express his appreciation to members of his own Department for the manner in which they have carried out their duties.



Annual Report

of the Minister of National Health and Welfare

Under the

Hospital Insurance
and

Diagnostic Services Act



for the Fiscal Year Ended March 31, 1962

ANNUAL REPORT

OF THE MINISTER OF NATIONAL HEALTH AND WELFARE

ON THE OPERATION OF

AGREEMENTS WITH THE PROVINCES

UNDER THE

HOSPITAL INSURANCE AND DIAGNOSTIC SERVICES ACT

FOR THE FISCAL YEAR ENDED

MARCH 31, 1962

INDEX OF TABLES

	<u>PAGE</u>
TABLE A - Number of Insured Persons on March 31, 1962 by Province as Reported for Purposes of Advance Payments	6
TABLE B - Net Population Certified by the Dominion Statistician by Province as used for Calculation of Per Capita Costs and for Making Advance Payments to Non-Premium Provinces	8
TABLE C - Summary of Payments made by Canada to Participating Provinces by Provinces, 1961-62 Fiscal Year	11
TABLE D - Payment by Canada, Fiscal Year 1958-59, 1959-60, 1960-61, 1961-62 and Total Payments July 1, 1958 - March 31, 1962	13
TABLE E - Payments by Canada, July 1, 1958 to March 31, 1962, by Province and by Calendar Year	15
- - - - -	
TABLE I - Number of Hospitals and Other Facilities listed in Provincial Agreements at December 31, 1960, by Province	18
TABLE II - Number of Beds and Cribs set up on December 31, 1960, and Rate per 1,000 Population in Hospitals Listed in Hospital Insurance Agreements by Province	18
TABLE III - Number of Beds and Cribs set up on December 31, 1960, in Hospitals listed in Hospital Insurance Agreements, by Ownership of Hospital and by Province...	20

INDEX OF TABLES (Cont'd)

	<u>PAGE</u>
TABLE IV - Number and Percentage Distribution of Beds and Cribs set up on December 31, 1960, by type of Bed and size of Hospital, in Budget Review General Hospitals	22
TABLE V - Standard Ward Beds and Cribs set up on December 31, 1960, in Hospitals Listed in Hospital Insurance Agreements, by Ownership of Hospital and by Province	24
TABLE V (a) - Standard Ward Beds set up as a Percent of Total Accommodation on December 31, 1960, in Hospitals Listed in Hospital Insurance Agreements, by Ownership of Hospital and by Province	25
TABLE VI - Total Patient-Days During Year, Insured Patient-Days During Year, Insured Patient-Days as a Percent of Total Patient-Days and Rates per 1,000. Total Population, Adults and Children, in Hospitals listed in Hospital Insurance Agreements, by Province, 1960	27
TABLE VII - Number and Percentage Distribution of Total Patient-Days During Year, Adults and Children, in Hospitals Listed in Hospital Insurance Agreements, by Status of Hospital and by Province, 1960	30
TABLE VIII - Number of Adult and Child Patient-Days in Standard, Semi-Private and Private Wards, and Percentages of Total Patient-Days in Budget Review Hospitals, by Province, 1960	32
TABLE IX - Number of Adult and Child Patient-Days in Standard, Semi-Private and Private Wards, and Percentages of Total Patient-Days in Contract Hospitals, by Province, 1960.	34

INDEX OF TABLES (Cont'd)

	<u>PAGE</u>
TABLE X - Number and Percentage Distribution of Adult and Child Separations, by Length of Stay from date of Admission, and by Province, Budget Review General Hospitals, 1960	36
TABLE XI - Average Length of Stay from Date of Admission for Adults and Children Separated from Hospital During Year (Discharges and Deaths), by Bed-Size of Hospital and by Province, Budget Review General and Chronic and Convalescent Hospitals, 1960	38
TABLE XII (a) - Percentage Occupancy of Total Accommodation Beds and Cribs set up in Budget Review General Hospitals, by Bed-Size of Hospital and by Province, 1960	40
TABLE XII (b) - Percentage Occupancy of Standard Ward Beds and Cribs set up in Budget Review General Hospitals, by Bed-Size of Hospital and by Province, 1960	41
TABLE XII (c) - Percentage Occupancy of Preferred Accommodation Beds and Cribs set up in Budget Review General Hospitals, By Bed-Size of Hospital and by Province, 1960	42
TABLE XIII - Number of Persons Employed Full-Time or in Training for Selected Professional Categories, in Hospitals Listed in Hospital Insurance Agreements, by Province, as at December 31, 1960	44
TABLE XIV - Amount of Revenue fund Expenditures by Type of Account, Budget Review Hospitals, by Province, 1960	46
TABLE XV - Revenue Fund Expenditures per Patient-Day by Type of Account, Budget Review Hospitals, by Province, 1960	47

INDEX OF TABLES (Cont'd)

	<u>PAGE</u>
TABLE XVI - Revenue Fund Expenditures per Capita by Type of Account, Budget Review Hospitals, by Province, 1960	48
TABLE XVII - Percentage Distribution of Revenue Fund Expenditures by Type of Account, Budget Review Hospitals, by Province, 1960	49

ANNUAL REPORT
of the
MINISTER OF NATIONAL HEALTH AND WELFARE
on the operation of
Agreements with the Provinces
under the
Hospital Insurance and Diagnostic Services Act
for the fiscal year ended March 31, 1962.

This is the fourth report to Parliament in accordance with Section 9 of the Hospital Insurance and Diagnostic Services Act and it is made with respect to the operation of the Agreements made under the Act for the fiscal year ended March 31, 1962. It is the first report for a period during which all of the provinces and the territories were participating in the hospital insurance program for the whole of the year under review. As noted in the last annual report, all provinces had commenced operation by the end of the previous year but some of the provinces had not completed their first year of operation at that time. For this reason, the present annual report reflects what might be described as a national picture of a program which in effect consists of a series of provincially administered plans.

In this report an outline is given of amendments which have been made during the year to agreements with the provinces; an amendment which was made to the hospital insurance regulations; an outline of the activities of the Advisory Committee on Hospital Insurance and Diagnostic Services and its subcommittees and working parties; a description of and statistical data relating to the number of persons covered by hospital insurance programs; and an outline of the statutory basis for federal contributions and advances and statistical data relating to payments made to the provinces in accordance with the agreements. In addition statistical data derived from the Annual Return of Hospitals for 1960 are presented and analyzed.

During the year under review, a number of amendments were made in provincial legislation and amendments were also made in the agreements under the Act where relevant. One amendment was also made in federal legislation.

Amendments to the Agreements

The majority of the amendments to the agreements related to the hospitals participating in the provincial programs. As in previous years, a wide variety of hospitals were included in the programs as well as certain nursing homes providing an acceptable level of care for long-term patients, which have been listed on a temporary basis.

Other amendments to the agreements made during the year related to the methods selected by the provinces for the extramural training of hospital personnel, to ensure that there was no duplication of federal funds made available for this purpose through the national health grants program on the one hand, and hospital insurance on the other.

Some of the amendments made in the agreements towards the end of the year under review, related to the extension of out-patient services which were to become effective on April 1, 1962: both Nova Scotia and Manitoba completed amending agreements in this regard. The Nova Scotia amendment had the effect of extending and clarifying the minor medical and surgical procedures to be provided as insured out-patient services; and the Manitoba amendment had the effect of providing certain rehabilitation services as insured out-patient services. The amendments to the agreement with Ontario became effective March 1, 1962 and had the effect of extending the out-patient services in that province to include certain types of medical and surgical procedures. At the close of the fiscal year under review, Ontario was completing the administrative arrangements necessary to ensure the availability of these services on a broad basis.

A number of minor amendments were made in the agreements which had the effect of clarifying certain technical points; and a revised version of out-of-province benefits was drawn up by Prince Edward Island.

Amendment to Federal Regulations

A change which was made in the federal legislation had the effect of providing to the provinces a larger advance payment than had been made previously. By an amendment to the Hospital Insurance Regulations, changing the formula for the advance payments from "twenty-two percent of the per capita cost of in-patient services in Canada" to "twenty-three and one-half percent of the per capita cost of in-patient services in Canada", the provinces receive a larger portion of the final contribution through the advances paid, with respect to payments commencing January 1962. This amendment had been approved by all the provinces prior to its enactment in accordance with the provisions of the federal Act.

Advisory Committee and Related Bodies

The Advisory Committee on Hospital Insurance and Diagnostic Services held two meetings during the year under review, the first of these being held April 20-21 and the second November 6-7, 1961. The subjects discussed at these meetings were broad in range and included an exchange of information relating to such matters as methods of controlling costs. Consideration was also given to reports prepared by the three subcommittees and working parties.

The Subcommittee on Quality of Care, Research and Statistics, held its third meeting on September 12 and 13, 1961 and made substantial progress towards finalizing the work relating to uniform definitions for hospital admission and separation forms carried out by one of its working parties. The working party dealing with this subject had prepared its third report at a meeting held previously on June 29 and 30, 1961.

Two other working parties of the Subcommittee on Quality of Care, Research and Statistics also held meetings during the year under review. The Working Party on Hospital Standards held three meetings in September and November 1961 and February 1962 and made substantial progress in formulating guide hospital standards. The Working Party on Hospital Construction Standards also met in September 1961.

The Subcommittee on Finance and Accounting held a meeting on September 14 and 15, 1961 which had been preceded in June 1961 by a meeting of an ad hoc working party set up to examine Part II of the Annual Return of Hospitals.

The Subcommittee on Residence and Uniformity of Benefits held its fourth meeting June 1 and 2, 1961 and discussed a wide variety of problems having interprovincial connotations.

The Number of Persons Covered

The number of insured persons in participating provinces as reported in the last Report of Parliament was 17,673,144. The number of persons covered at the end of the fiscal year under review was 18,060,328 an increase of 387,184.

In presenting data related to the number of persons covered by the provincial programs, regard must be had to the varying methods used by the provinces for calculating the number of insured persons. In provinces which levy a premium, insured persons are registered and identification certificates are provided. However, the methods of registration in some

provinces consist of the registration of single persons on the one hand, and family heads on the other. Thus, in some of these premium provinces, it is possible to give the precise number of single subscribers and of family subscribers; the number of persons covered by the family subscriber, however, is not known since the family rate applies wherever a family head has one or more dependants.

In order to make a more precise count with regard to the family groups in premium provinces where no head count is made, therefore, it has been necessary to calculate the number of dependants in the average family unit in the province. In this way, it is possible to estimate the number of persons in the province eligible for and entitled to insured services at the end of each month, an estimation which is required to be made in connection with the calculation of the federal contribution and contained in the formula set out in the Act. The average family unit in the provinces concerned, is calculated by the Dominion Statistician.

In provinces where no premiums are levied and where the provincial share of costs is paid out of general revenue, sales or property tax, no individual registration of insured persons is required and coverage is universal. Insofar as these provinces are concerned, provision was made in the Agreements for calculation on the basis of a population estimate for a given date in the year (June 1) as determined by the Dominion Statistician.

The Hospital Insurance Regulations define 'population' to mean the population of Canada or of the province, as certified by the Dominion Statistician, and, calculated for a calendar year in which a census was taken, as the population of Canada or of the province as ascertained by the census; for other than a census year, the population of Canada or of the province on the 1st day of June in that year according to published original intercensal estimates of the Dominion Statistician.

There are certain categories of persons with respect to whom hospital services are provided under a statute other than the hospital insurance legislation, who are therefore not entitled to insured services. For the most part, these consist of members of the Armed Forces and the Royal Canadian Mounted Police. In addition, inmates of federal penitentiaries are provided with hospital services by the federal government. All of these groups together account for a very small proportion of the total population. In the D. B. S. population estimates, therefore, the number of the members of the regular forces, members of the Royal Canadian Mounted Police and persons serving terms of imprisonment in a federal penitentiary are deducted so as to provide a net population figure for the purpose of calculating the eligible population.

With the exception of Ontario and Prince Edward Island, participation by residents in the program was either automatic or compulsory, depending on the methods of provincial financing. In Newfoundland, Nova Scotia, New Brunswick, Quebec, Alberta, British Columbia, the Northwest Territories and the Yukon, residents are automatically insured for hospital insurance. In Manitoba and Saskatchewan all residents are required to pay the relevant premium or tax, hospital insurance coverage being universally compulsory. In Ontario and Prince Edward Island, compulsory coverage is limited to certain employed or designated groups, while coverage remains voluntary for other residents.

Table A shows the estimated number of insured persons on March 31, 1962 as reported by the provinces in accordance with the agreements, and the percentage of persons insured. The total number of insured persons on March 31, 1962 was 18,060,328 out of a total net population of 18,396,000 or 98.2% of the estimated entitled population. This represents a slight increase over the previous year when 97.7% of the net population was insured. This increase of 387,184 persons exceeds the population increase for the period under review.

It will be noted that the provinces in which the percentage of persons covered is lowest, Prince Edward Island and Ontario, are the provinces in which hospital insurance coverage is partially voluntary in accordance with provincial law.

It will be noted that the figures shown in the first and second columns of Table A are identical for all provinces with the exception of Prince Edward Island, Ontario, Manitoba and Saskatchewan, reflecting the methods used in these provinces for insuring the population.

TABLE A
NUMBER OF INSURED PERSONS ON MARCH 31ST, 1962
BY PROVINCE
AS REPORTED FOR PURPOSES OF ADVANCE PAYMENTS

PROVINCE	Number of Insured Persons March 31, 1962	Advance Estimate of Net Population June 1, 1962	Percentage of Persons Insured
Newfoundland	469,000	469,000	100.0%
Prince Edward Island	93,140	105,000	88.7%
Nova Scotia	723,000	723,000	100.0%
New Brunswick	597,000	597,000	100.0%
Quebec	5,333,000	5,333,000	100.0%
Ontario	6,011,041	6,282,000	95.7%
Manitoba	894,839	924,000	96.8%
Saskatchewan	901,308	925,000	97.4%
Alberta	1,359,000	1,359,000	100.0%
British Columbia	1,641,000	1,641,000	100.0%
Yukon	15,000	15,000	100.0%
Northwest Territories	23,000	23,000	100.0%
CANADA	18,060,328	18,396,000	98.2%

Table B shows, by province, the net population, as certified by the Dominion Statistician which was used for calculating the per capita costs and in connection with advance payments for non-premium provinces. The first column, which shows the population based on an advance estimate for June 1, 1961 totalling 18,080,000, was used for calculating the advance payments to non-premium provinces for April and May 1961, it was also used for calculating the estimated national per capita costs for the calendar year 1961.

The second column showing 18,034,000 is the net population based on the original published intercensal estimate and was used for the purpose of calculating advance payments to non-premium provinces for the months of June to December inclusive, during the calendar year 1961.

The third column shows the estimated population based on an advance estimate for June 1, 1962, amounting to 18,396,000, which was used for calculating the advance payments to non-premium provinces for the months of January to March inclusive, for the calendar year 1962. This estimate, unlike that of the previous year, was based on a projection of the actual census made on June 1, 1961. The net population at that date was 18,104,624.

Federal Contributions

The amount of the federal contributions to the provinces is calculated on the basis of a formula contained in the Hospital Insurance and Diagnostic Services Act. It has been designed in such a way as to provide greater federal assistance to those provinces in which the per capita cost of hospital care is lower and to provide for an equitable federal contribution to the provinces, having regard to the considerable variation in the per capita costs between the provinces.

The federal contribution as set out in the Act, is the aggregate in the year of twenty-five per cent of the per capita cost of in-patient services in Canada, that is the national per capita cost, and twenty-five per cent of the per capita cost of in-patient services in the province less the amount of authorized charges, multiplied by the average for the year of the number of insured persons in the province.

The effect of this formula is that the high-cost provinces receive a lower percentage of their costs from the federal government than do the low-cost provinces. The inclusion in the formula of the national per capita cost, however, acts as a deterrent to the high-cost provinces, since the more provincial costs exceed the national costs, the lower the percentage of the costs the federal contribution will be.

TABLE B

NET POPULATION CERTIFIED BY THE DOMINION STATISTICIAN,
BY PROVINCE
AS USED FOR CALCULATION OF PER CAPITA COSTS AND FOR
MAKING ADVANCE PAYMENTS TO NON-PREMIUM PROVINCES

PROVINCE	June 1, 1961		June 1, 1962
	Based on Advance Estimate	Based on Original Published Intercensal Estimate	Based on Advance Estimate
Newfoundland	470,000	468,000	469,000
Prince Edward Island	104,000	104,000	105,000
Nova Scotia	711,000	711,000	723,000
New Brunswick	604,000	604,000	597,000
Quebec	5,208,000	5,198,000	5,333,000
Ontario	6,184,000	6,165,000	6,282,000
Manitoba	903,000	902,000	924,000
Saskatchewan	913,000	914,000	925,000
Alberta	1,315,000	1,310,000	1,359,000
British Columbia	1,631,000	1,622,000	1,641,000
Yukon	14,000	14,000	15,000
Northwest Territories	23,000	22,000	23,000
CANADA	18,080,000	18,034,000	18,396,000

Since the federal contribution is calculated on an annual basis, provision was made in the Hospital Insurance Regulations for advances on account of contributions, so that the provinces would not be required to wait a full year for reimbursement of the amounts which they are required to pay to hospitals on a continuing basis. In order to expedite the payment of advances and, at the same time, to forestall the likelihood of major financial adjustments after the end of the year, the formula which is used for the calculation of the advance, provides for a small hold-back of the amount due to the province. The formula for the advance, therefore, differs from the formula for the annual contribution in that twenty-three and one half per cent of the per capita cost of in-patient services in Canada is paid (twenty-two per cent prior to January 1st, 1962, in accordance with the amendment to the Hospital Insurance Regulations discussed above), instead of twenty-five per cent provided for in the annual calculation, and the amount of the advance is calculated on the basis of provincial payments, which may or may not be shareable costs as defined in the law.

Since the amount of the federal payment is calculated on a formula which includes the per capita cost of hospital care in Canada, continuing studies are carried out to ensure that this figure maintains accuracy in an area where costs are subject to fluctuations. Changes in the national per capita cost are made, subject to the approval of Treasury Board, at varying intervals as the situation requires. The purpose of making periodic adjustments in the national per capita is to maintain realistic advance payments and to eliminate major adjustments in the calculations of the federal contribution.

The costs which are shareable by the federal government, are described in the federal legislation. The Act specifically excludes from shareable costs amounts expended on the capital cost of land, buildings or physical plant; for the payment of any capital debt or interest related to capital debt; for the payment of debt incurred prior to the coming into force of the agreement or for the interest related to such prior debt; or any provision for depreciation on the value of land, buildings or physical plant. The term physical plant is defined in the Regulations as excluding furniture and movable equipment or non-movable equipment specially required for use in a hospital. Thus, these items are shareable.

In this connection, it should be noted that most of the capital items which are, by definition, excluded from shareable costs, such as the costs of construction and other matters pertaining to physical plant, are supported by the federal government through the National Health Grants program and particularly through the Hospital Construction grant.

Generally speaking, shareable costs are the operating costs of the hospital which have been approved by the provincial authority and which have been determined in accordance with recognized and generally accepted accounting principles and procedures. The operating costs of a hospital as defined in the Regulations, however, specifically exclude a number of items which, although provided in or in connection with the hospital, are not considered to be an integral part of the operation of the hospital.

The province is required to review and approve the costs of each hospital and these approved costs form the basis of the federal sharing formula.

Table C is the summary of payments by Canada to participating provinces during the fiscal year under review. It includes advance payments on contributions as well as the final adjusted contribution for 1959 which was discussed in last year's report. In that report, an amount of \$10,799,715.75 was shown as owing to participating provinces; it will be noted in the penultimate column that the actual payment made during the fiscal year 1961-62 was \$9,816,709.52. This was due to the fact that the final settlement to Alberta (\$983,006.23) was not paid during the year, pending clarification of the interpretation of a certificate required in connection with the provincial statement of costs.

The total payments to the provinces for the year under review were \$283,883,096.55. The bulk of these payments was for in-patient services.

TABLE C

SUMMARY OF PAYMENTS MADE BY CANADA TO PARTICIPATING PROVINCES,
BY PROVINCES, 1961-62 FISCAL YEAR

PROVINCE	Advance Payments			Total	Final Payments	Total Payments
	In-Patient	Out-Patient				
Newfoundland	\$ 5,555,035.00	\$ 279,973.81	\$ 5,835,008.81	\$ 423,278.45	\$ 6,258,287.26	
Prince Edward Island	1,263,221.83	89,935.18	*1,353,157.01	28,737.38	1,381,894.39	
Nova Scotia	10,475,790.60	719,788.41	11,195,579.01	677,353.00	11,872,932.01	
New Brunswick	9,017,176.20	177,711.39	9,194,887.59	351,886.67	9,546,774.26	
Quebec	73,022,517.78	-	73,022,517.78	-	73,022,517.78	
Ontario	96,865,647.77	1,299,639.35	98,165,287.12	6,333,593.43	104,498,880.55	
Manitoba	14,458,080.59	132,650.28	14,590,730.87	655,193.36	15,245,924.23	
Saskatchewan	15,133,024.19	371,300.35	15,504,324.54	449,485.65	15,953,810.19	
Alberta	19,730,547.07	-	19,730,547.07	-	19,730,547.07	
British Columbia	24,800,369.36	-	24,800,369.36	897,181.58	25,697,550.94	
Yukon	294,029.06	2,007.29	296,036.35	-	296,036.35	
Northwest Territories	376,251.30	1,690.22	377,941.52	-	377,941.52	
TOTALS	\$ 270,991,690.75	\$ 3,074,696.28	\$ 274,066,387.03	\$ 9,816,709.52	\$ 283,883,096.55	

* Including March 1961 claim paid during 1961-62 fiscal year \$95,400.78

Table D shows the total payments (\$678, 553, 519.83) by fiscal year to participating provinces since the inception of the hospital insurance program on July 1, 1958. It should be recalled that in 1958-59, only five provinces (Newfoundland, Manitoba, Saskatchewan, Alberta and British Columbia) participated at the beginning of the program, while two additional provinces (Nova Scotia and Ontario) operated programs for three months only. These seven provinces were joined during the fiscal year 1959-60, by two other provinces which operated programs for only part of that fiscal year (New Brunswick from July 1st and Prince Edward Island from October 1st). During the fiscal year 1960-61 the remaining provinces commenced to participate in the program (Northwest Territories, April 1, 1960; Yukon, July 1, 1960 and Quebec, January 1, 1961). The fiscal year 1961-62 was the first year during which all of the provinces were participating for the full fiscal year.

It should also be kept in mind that the final adjusted payments for 1958 were made for all provinces except Manitoba in 1959-60, the Manitoba payment for 1958 being made in the fiscal year 1960-61. The 1959 final adjusted payments were made to all provinces except Alberta during the fiscal year 1961-62.

Other factors which must be considered in connection with the payments shown in this table, are the increase in the number of hospital beds which are being made available to meet the needs of an increasing population; the increase in the coverage made available through provincial programs, particularly for inpatient chronic care and extensions of outpatient services. Not least is the consideration of increasing hospital costs due to re-adjustments in salaries and wages which form a substantial percentage of overall hospital expenditures.

TABLE D

PAYMENTS BY CANADA - FISCAL YEAR 1958-59, 1959-60, 1960-61, 1961-62
AND TOTAL PAYMENTS JULY 1, 1958 - MARCH 31, 1962

PROVINCE	Fiscal Year				Total payments from July 1, 1958 to March 31, 1962
	1958-59	1959-60	1960-61	1961-62	
Newfoundland	\$ 2,857,886.84	\$ 4,707,692.94	\$ 5,094,934.21	\$ 6,258,287.26	\$ 18,918,801.25
Prince Edward Island	—	447,338.27	1,010,806.54	1,381,894.39	2,840,039.20
Nova Scotia	1,572,782.64	8,162,540.78	9,595,387.52	11,872,932.01	31,203,642.95
New Brunswick	—	4,575,374.90	7,914,412.71	9,546,774.26	22,036,561.87
Quebec	—	—	13,936,740.72	73,022,517.78	86,959,258.50
Ontario	13,140,213.12	71,892,833.66	84,484,271.86	104,498,880.55	274,016,199.19
Manitoba	7,148,534.97	11,324,466.35	13,048,916.19	15,245,924.23	46,767,841.74
Saskatchewan	8,430,441.93	13,378,379.43	14,453,463.99	15,953,810.19	52,216,095.54
Alberta	8,774,575.68	15,698,727.86	16,905,597.57	19,730,547.07	61,109,448.18
British Columbia	12,784,038.88	20,406,091.56	22,493,438.52	25,697,550.94	81,381,119.90
Yukon	—	—	168,683.75	296,036.35	464,720.10
Northwest Territories	—	—	261,849.89	377,941.52	639,791.41
TOTALS	\$ 54,708,474.06	\$ 150,593,445.75	\$ 189,368,503.47	\$ 283,883,096.55	\$ 678,553,519.83

Table E shows the total payments by province, by calendar year instead of by fiscal year, as was shown in Table D. As explained earlier, hospital insurance contributions are calculated on the basis of the calendar year. It will be noted that the amounts shown for 1958 and for 1959 represent both advance payments and final adjusted payments with the exception of the final adjusted payment to Alberta for 1959, explained above.

The amounts shown for 1960 and 1961 represent advance payments only and the amount shown for 1962 shows advances for the first three months of that calendar year ending March 31, 1962.

With regard to the 1962 advances, it should be noted that the formula for the payment of advances which was changed by the amendment to the Hospital Insurance Regulations mentioned above, was applicable for that year.

Total contributions for the calendar years 1960, 1961 and 1962 will exceed the amounts shown in the last three columns by the amount of the final adjusted payments which are still outstanding for these years.

Data Derived from the Annual Return of Hospitals for the Calendar Year 1960

This is the second year for which Returns are available from hospitals participating in provincial hospital insurance programs and listed in Schedule A of the Agreement. As explained in the Report to Parliament last year, the Annual Return of Hospitals was designed to fulfil the requirements of the Statistics Act which is administered by the Dominion Bureau of Statistics, and to implement provincial undertakings embodied in the Agreements under the Hospital Insurance and Diagnostic Services Act.

The Annual Return for 1960 was substantially the same as that used the previous year, certain refinements having been incorporated as a result of the efforts of two working parties associated with the Subcommittee

TABLE E

PAYMENTS BY CANADA - JULY 1, 1958 TO MARCH 31, 1962
BY PROVINCE AND BY CALENDAR YEAR

PROVINCE	1958	1959	1960	1961	1962
	Total Contributions	Total Contributions	Advances on Contributions	Advances on Contributions	Advances on Contributions
Newfoundland	\$ 1,990,135.23	\$ 4,788,013.82	\$ 4,993,523.94	\$ 5,656,923.57	\$ 1,490,204.69
Prince Edward Island	—	235,524.49	1,072,409.01	1,203,258.07	328,847.63
Nova Scotia	—	8,149,539.76	9,284,357.41	10,595,263.12	3,174,482.66
New Brunswick	—	3,331,614.19	7,324,197.80	9,086,618.46	2,294,131.42
Quebec	—	—	—	66,746,709.45	20,212,549.05
Ontario	—	72,610,303.71	80,860,904.31	95,016,981.49	25,528,009.68
Manitoba	4,779,865.66	11,556,009.75	12,599,069.20	14,086,400.97	3,746,496.16
Saskatchewan	5,775,875.67	13,276,380.46	14,087,667.58	15,119,648.10	3,956,523.73
Alberta	6,494,722.50	* 14,362,662.57	16,378,049.85	18,778,935.83	5,095,077.43
British Columbia	8,609,463.00	20,033,811.20	21,955,549.87	24,271,046.40	6,511,249.43
Yukon	—	—	112,205.47	269,520.51	82,994.12
Northwest Territories	—	—	180,126.09	362,037.05	97,628.27
TOTAL	\$ 27,650,062.06	\$ 148,343,859.95	\$ 168,848,060.53	\$ 261,193,343.02	\$ 72,518,194.27
CUMULATIVE TOTAL					\$ 678,553,519.83

* 1959 Final adjustment for Alberta withheld \$983,006.23. The amount of \$14,362,662.57 shown above represents advances only.

on Quality of Care, Research and Statistics and the Subcommittee on Finance and Accounting, of the Advisory Committee on Hospital Insurance and Diagnostic Services. It will be recalled that these Committees are made up of representatives of the provinces and interested federal departments including the Dominion Bureau of Statistics whose representative acted as chairman of one of the working parties.

The Return consists of two main parts, the first relating to facilities and services and the second relating to finances. The first part is broken down into six main segments: classification of hospital; beds; utilization data; departmental service data; personnel; and training facilities. The second part consists of details relating to the revenue fund; the plant fund; the endowment fund; and also requires certification by the provincial authority and an auditor's certificate.

As previously, two booklets were prepared for the use of individual hospitals, containing instructions and definitions for the 1960 Annual Returns. It will be noted that in presenting data from the Returns, reference is made to "budget review" hospitals, "budget review general" hospitals, "contract" hospitals and "federal" hospitals. The bulk of hospitals listed in the Agreements fall into the category of budget review hospitals, since public hospitals in the provinces come within this category for purposes of designation in the hospital insurance program. In order to differentiate between general hospitals designed essentially for acute or short-term care, and other special hospitals such as chronic and convalescent facilities, the designation "budget review general" is used in a number of tables.

For the purposes of the Annual Return, a "general" hospital is defined as a hospital which provides for the treatment and care of all types of diseases or at least a wide range of conditions; women's and children's hospitals are also classified as general unless they restrict admissions to particular conditions in these types of patients. A "contract" hospital is defined in the Hospital Insurance Regulations as a private or industrial hospital with which a province has contracted for the provision of insured services to insured persons. The category of hospital which is described as "federal" is also defined in the Hospital Insurance Regulations and is a hospital which is owned or operated by the Government of Canada. In this category are the hospitals administered by the Department of Veterans Affairs, the Department of National Defence and the Department of National Health and Welfare.

Although this report to Parliament relates to the fiscal year ended March 31, 1962, the statistical data in this section of the report relate to the calendar year 1960. It has been explained in earlier reports that statistical and financial data maintained by hospitals in Canada are on the

basis of the calendar year. During the calendar year 1960 not all of the provinces were participating in the hospital insurance program and the territories were only participating for a part of that year, the program in the Northwest Territories commencing on April 1 and in the Yukon on July 1 of that year. Quebec was not a participating province in 1960. Consequently, the statistical data in this part of the report excludes data from Quebec and only in some instances includes data for the two Territories.

In the following tables the estimates of population which are used where relevant relate to the revised intercensal population estimates for 1960 made by the Dominion Bureau of Statistics whereas the population estimates referred to in the Minister's report last year in connection with the statistical data derived from the Annual Return of Hospitals for 1959 were the unrevised population estimates in use prior to the 1961 Census.

Table I shows the number of hospitals and other facilities listed in the Agreements with the provinces at December 31, 1960, by province. The total number of hospitals (1,052) and other facilities in 1960 is, of course, larger than that shown last year for 1959. In addition to the inclusion in Table I of the Yukon and Northwest Territories, which had not been participating the previous year, it will be noted that there are substantial increases in the number of hospitals shown for Ontario (330) and Alberta (163) where nursing homes were added as contract hospitals. In the case of Alberta this is the first year for which these nursing homes are shown, while in Ontario additional nursing homes were added to those to which reference was made in last year's report. There was also an increase in the number of hospitals listed in Manitoba due to the addition of nine nursing stations operated by the federal government.

Of the total number of hospitals and other facilities, the majority continued to be the budget review hospitals (770). There were small increases in the number of these hospitals in Ontario and the provinces to the West. The increase in the number of contract and federal hospitals has already been noted.

Table II shows the number of beds and cribs set up on December 31, 1960 and the rate per 1,000 population in reporting hospitals listed in the hospital insurance Agreements, by province. In 1024 hospitals, compared to 920 hospitals in 1959, the number of beds and cribs set up was 86,178, as compared with 81,135 in 1959, for a rate per 1,000 estimated population of 6.7, as compared with 6.5 in 1959. The 1960 figures, however, include 26 hospitals with 584 beds and cribs in the Yukon and Northwest Territories.

TABLE I
NUMBER OF HOSPITALS AND OTHER FACILITIES LISTED IN
PROVINCIAL AGREEMENTS AT DECEMBER 31, 1960, BY PROVINCE

PROVINCE	Budget Review	Contract	Federal Government	Total
Newfoundland	25	16	1	42
Prince Edward Island	10	1	—	11
Nova Scotia	48	1	1	50
New Brunswick	36	1	2	39
Ontario	209	109	12	330
Manitoba	80	7	15	102
Saskatchewan	155	11	6	172
Alberta	114	42	7	163
British Columbia	90	17	6	113
Yukon	2	—	1	3
Northwest Territories	1	13	13	27
Canada (Excl. Quebec)	770	218	64	1,052

TABLE II
NUMBER OF BEDS AND CRIBS SET UP ON DECEMBER 31, 1960, AND RATE
PER 1,000 POPULATION⁽¹⁾ IN HOSPITALS LISTED IN
HOSPITAL INSURANCE AGREEMENTS BY PROVINCE

PROVINCE	Number of Hospitals	Beds and Cribs Set up on December 31	Rate per 1,000 Estimated Population January 1, 1961 (1)
Newfoundland	40	1,968	4.3
Prince Edward Island	9	649	6.2
Nova Scotia	48	4,003	5.5
New Brunswick	38	3,593	6.1
Ontario	326	39,687	6.4
Manitoba	99	6,559	7.2
Saskatchewan	167	7,546	8.2
Alberta	159	11,069	8.4
British Columbia	112	10,520	6.5
Yukon	3	157	11.2
Northwest Territories	23	427	18.6
Total (Excl. Quebec)	1,024	86,178	6.7

(1) Based on Revised Intercensal Population Estimates as of January 1, 1961, D.B.S., Ottawa.

It will be noted that the rates per 1,000 population differ quite substantially from province to province. With the exception of the Territories, where conditions may be described as atypical, the rates in 1960 varied from ~~3~~4.3 in Newfoundland to 8.4 in Alberta. In the western provinces the rates per 1000 population is generally higher than the national average while it is lower in the east.

Comparing the ratios for nine provinces for 1960 with the corresponding figures for 1959*, it is noted that the average for these provinces increased from 6.4 to 6.7 per thousand population. The largest increase occurred in Alberta (from 7.7 to 8.4), which was due in part to the inclusion of 38 nursing homes. Newfoundland increased from 4.1 to 4.3, New Brunswick from 5.9 to 6.1, Ontario from 6.2 to 6.4, Manitoba from 6.9 to 7.2 and British Columbia from 6.3 to 6.5. A slight decrease is noted in the case of Saskatchewan (from 8.3 to 8.2) and the ratio in Prince Edward Island and Nova Scotia remained unchanged.

Table III shows the number of beds and cribs set up on December 31, 1960 in the reporting hospitals listed in the hospital insurance Agreements, by ownership and by province. It will be noted that most (73,151) of the total number (86,178) of beds and cribs set up are in budget review hospitals. Over one-third of these (27,735) are owned by lay corporations while a slightly lower number (22,617) are in hospitals owned by religious organizations. Municipal government hospitals (18,728) and provincial government hospitals (4,071) account for the bulk of the remaining beds.

The varied ownership pattern of the budget review hospitals from province to province will be noted in the provincial distribution. The majority of beds in hospitals owned by voluntary lay corporations will be found in Prince Edward Island (420 out of a total of 649), Nova Scotia (1,074 out of a total of 3,550) Ontario (16,851 out of a total of 33,630), Manitoba (1,902 out of a total of 5,495), British Columbia (6,286 out of a total of 8,909) and the Northwest Territories (48 out of 48). In Manitoba, however, both the beds in religious hospitals (1,854) and in municipal hospitals (1,739) do not fall very short of those in hospitals owned by lay corporations.

In New Brunswick (1,382 out of 3,156) and the Yukon Territory (21 out of 37) the largest number of beds set up were in hospitals owned by religious bodies. In Saskatchewan (4,438 out of 7,344) and in Alberta

* RE-CALCULATED USING THE REVISED INTERCENSAL POPULATION ESTIMATES AS OF JUNE 1, 1959, DOMINION BUREAU OF STATISTICS.

TABLE III
NUMBER OF BEDS AND CRIBS SET UP ON DECEMBER 31, 1960,
IN HOSPITALS LISTED IN HOSPITAL INSURANCE AGREEMENTS,
BY OWNERSHIP OF HOSPITAL AND BY PROVINCE

PROVINCE	Number of Hospitals	Budget Review Hospitals					Contract Hospitals	Federal Government Hospitals	All Hospitals
		Lay Corporation	Religious Body	Municipal Government	Provincial Government	All Budget Review Hospitals			
Newfoundland	40	223	309	-	1,018	1,550	368	50	1,968
Prince Edward Island	9	420	199	-	30	649	-	-	649
Nova Scotia	48	1,074	979	899	598	3,550	-	453	4,003
New Brunswick	38	717	1,382	988	69	3,156	-	437	3,593
Ontario	326	16,851	10,593	6,099	87	33,630	2,602	3,455	39,687
Manitoba	99	1,902 (1)	1,854	1,739	-	5,495	99	965	6,559
Saskatchewan	157	20	1,768	4,438	1,118	7,344	37	165	7,546
Alberta	159	194	3,124	4,401	1,064	8,783	1,213	1,073	11,069
British Columbia	112	6,286	2,388	164	71	8,909	129	1,482	10,520
Yukon	3	-	21	-	16	37	-	120	157
Northwest Territories	23	48	-	-	-	48	307	72	427
Total (Excl. Quebec)	1,024	27,735 (1)	22,617	18,728	4,071	73,151	4,755	8,272	86,178

(1) Includes one public hospital of 28 beds owned by an industrial firm.

(4,401 out of 8,783) the majority of beds in budget review hospitals were in those owned by municipal governments. It should be noted, however, that in Alberta the number of beds in hospitals owned by religious bodies (3,124) was second only to the number of beds in religious hospitals in Ontario (10,593).

In Newfoundland the majority of beds set up in budget review hospitals (1,018 out of 1,550) were in hospitals owned by the provincial government. The number of beds set up in provincial government hospitals in Saskatchewan (1,118) and in Alberta (1,064), however, exceeded those in Newfoundland.

Approximately one-tenth of the beds and cribs set up (8,272) were in federal government hospitals while only a relatively small number (4,755) were in contract hospitals. The vast majority of the ^{contract} contract hospitals are in Ontario (2,602 out of 4,755).

The general pattern of beds and cribs set up in 1960 does not differ substantially from that reported for 1959 although it will be noted that the number of beds and cribs set up in contract hospitals increased considerably (from 2,667 in 1959 to 4,755).

Table IV shows the number and percentage distributions of beds and cribs set up on December 31, 1960 by type of beds and size of hospital, in budget review general hospitals. The total number of hospitals reporting for 1960 (710) reveals a slight increase over the total number reporting for 1959 (696).

It will be noted that the number of beds allocated to medicine and surgery (41,594) make up over 60% of the total number of beds and cribs (66,619) set up. In the hospitals of a rated bed capacity under ten beds, the percentage allocated to medicine and surgery is almost 70% while in the hospitals of 1,000 beds and over the percentage is just over 60%.

Obstetric and paediatric beds each comprise about 14% of the beds in public general hospitals. It will be noted that the percentage of obstetric beds is greater in the smaller hospitals than in the larger hospitals while the percentage of paediatric beds is greater in the medium sized hospitals, a lower percentage being found in the small size and large size hospitals. The percentage of obstetric beds appears to decrease in inverse proportion to the size of the hospitals.

The distribution of other beds, which consist for the most part of orthopaedic, psychiatric or chronic beds (6,566) increases in proportion to the increase in the size of hospital, the smallest percentage (1.3) being shown for hospitals having the smallest bed size, and the largest percentage (23.3) being shown in the largest bed size group. However, the largest number of (2,152) beds of this category are in the 500-999 bed size group.

TABLE IV
NUMBER AND PERCENTAGE DISTRIBUTION OF BEDS AND CRIBS SET UP ON DECEMBER 31, 1960,
BY TYPE OF BED AND SIZE OF HOSPITAL,
IN BUDGET REVIEW GENERAL HOSPITALS
CANADA (Excluding Quebec)

Type of Bed	Bed-Size of Hospital (Rated Bed Capacity)									Total
	1-9	10-24	25-49	50-99	100-199	200-299	300-499	500-999	1000 and over	
	Number									
Medicine-Surgery	383	2,744	4,705	4,873	7,397	4,457	6,880	7,161	2,994	41,594
Obstetric	96	723	1,164	1,395	2,077	1,050	1,405	1,106	412	9,428
Paediatric	68	600	960	1,188	2,076	1,232	1,377	1,122	408	9,031
Other ⁽¹⁾	7	103	192	389	618	482	1,466	2,152	1,157	6,566
Total (excl. Quebec)	554	4,170	7,021	7,845	12,168	7,221	11,128	11,541	4,971	66,619
Percent										
Medicine-Surgery	69.1	65.8	67.0	62.1	60.8	61.7	61.8	62.0	60.2	62.4
Obstetric	17.3	17.3	16.6	17.8	17.1	14.5	12.6	9.6	8.3	14.1
Paediatric	12.3	14.4	13.7	15.1	17.1	17.1	12.4	9.7	8.2	13.6
Other ⁽¹⁾	1.3	2.5	2.7	5.0	5.1	6.7	13.2	18.6	23.3	9.9
Total (excl. Quebec)	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0
Number of Hospitals Reporting	55	210	178	102	84	31	29	17	4	710

(1) Including orthopaedic, psychiatric, tuberculosis, isolation and long term beds, etc.

Tables V and V (a) show the number and percentage of standard ward beds in relation to the total number of beds set up on December 31, 1960 in hospitals, by ownership and by province. It will be noted that on a national basis 69.7% of all beds set up in all hospitals were for standard ward care, although there was considerable variation (from 57.5% in P. E. I. to 98.1% in the Yukon) between the provinces and territories. In seven provinces over 75% of the total number of beds set up was for standard ward care.

It is interesting to note that the higher proportion of standard ward accommodation is generally to be found in those provinces where public hospital programs have been in operation for a considerable number of years (Newfoundland 86.3%; Saskatchewan 80.7%; Alberta 83.2%; and British Columbia 76.8%).

It will be noted that the highest percentage of standard ward beds were in hospitals owned and operated by the three levels of government (federal 100%; provincial 83.5%; and municipal 73.4%). The budget review hospitals owned and operated by lay corporations and religious bodies show a considerably lower percentage (62.6% and 60.3%) of standard ward beds in relation to the total number of beds set up.

The percentage of standard ward beds (69.7%) in all hospitals (1,024) in all provinces except Quebec on December 31, 1960, is only slightly higher than that reported for 1959 (68.9% for all hospitals reporting (908) in nine provinces. There was a slight decrease in the proportion of beds allocated for standard ward in Ontario (59.9% as compared to 60.3%); in Saskatchewan (80.7% as compared with 81.2%); and British Columbia (76.8% as compared with 77.2%). This was offset by a slight increase in the accommodation allocated for standard ward in Newfoundland (86.3% as compared to 85.6%); Prince Edward Island (57.5% as compared to 57.2%); Nova Scotia (67.7% as compared to 67.1%); New Brunswick (65.2% as compared to 64.6%); and Manitoba (80.0% as compared to 78.7%). The percentage (83.2%) reported by Alberta is slightly higher than that reported last year, due to the inclusion of 38 nursing homes in that province.

TABLE V

STANDARD WARD BEDS AND CRIBS SET UP ON DECEMBER 31, 1960, IN HOSPITALS LISTED IN HOSPITAL INSURANCE AGREEMENTS, BY OWNERSHIP OF HOSPITAL AND BY PROVINCE

PROVINCE	Number of Hospitals Reporting	Budget Review Hospitals					Contract Hospitals	Federal Government Hospitals	All Hospitals
		Lay Corporation	Religious Body	Municipal Government	Provincial Government	All Budget Review Hospitals			
Newfoundland	40	188	193	-	914	1,295	354	50	1,699
Prince Edward Island	9	238	105	-	30	373	-	-	373
Nova Scotia	48	749	519	604	385	2,257	-	453	2,710
New Brunswick	38	495	7,1	590	69	1,905	-	437	2,342
Ontario	326	9,451	5,757	3,426	56	18,690	1,642	3,455	23,787
Manitoba	99	1,323 (1)	1,252	1,651	-	4,226	59	965	5,250
Saskatchewan	167	18	1,263	3,570	1,034	5,885	37	165	6,087
Alberta	159	193	2,116	3,794	825	6,928	1,213	1,073	9,214
British Columbia	112	4,660	1,658	112	71	6,501	102	1,482	8,085
Yukon	3	-	18	-	16	34	-	120	154
Northwest Territories	23	48	-	-	-	48	215	72	335
Total (excl. Quebec)	1,024	17,363 (1)	13,632	13,747	3,400	48,142	3,622	8,272	60,036

(1) Includes one public hospital with 24 standard ward beds owned by an industrial firm.

TABLE V (a)

STANDARD WARD BEDS SET UP AS A PERCENT OF TOTAL ACCOMMODATION ON DECEMBER 31, 1960,
IN HOSPITALS LISTED IN HOSPITAL INSURANCE AGREEMENTS, BY OWNERSHIP OF HOSPITAL AND BY PROVINCE

PROVINCE	Number of Hospitals Reporting	Budget Review Hospitals				All Budget Review Hospitals	Contract Hospitals	Federal Government Hospitals	All Hospi- tals
		Lay Corporation	Religious Body	Municipal Government	Provincial Government				
Newfoundland	40	84.3	62.5	-	89.8	83.5	96.2	100.0	86.3
Prince Edward Island	9	56.7	52.8	-	100.0	57.5	-	-	57.5
Nova Scotia	48	69.7	53.0	67.2	64.4	63.6	-	100.0	67.7
New Brunswick	38	69.0	54.3	59.7	100.0	60.4	-	100.0	65.2
Ontario	326	56.1	54.3	56.2	64.4	55.6	63.1	100.0	59.9
Manitoba	99	69.6(1)	67.5	94.9	-	76.9	59.6	100.0	80.0
Saskatchewan	167	90.0	71.4	80.4	92.5	80.1	100.0	100.0	80.7
Alberta	159	99.5	67.7	86.2	77.5	78.9	100.0	100.0	83.2
British Columbia	112	74.1	69.4	68.3	100.0	73.0	79.1	100.0	76.8
Yukon	3	-	85.7	-	100.0	91.9	-	100.0	98.1
Northwest Territories	23	100.0	-	-	-	100.0	70.0	100.0	78.5
Total (excl. Quebec)	1,024	62.6(1)	60.3	73.4	83.5	65.8	76.2	100.0	69.7

(1) Includes one public hospital with 24 standard ward beds owned by an industrial firm.

Table VI shows the total number of patient days and the rates per 1,000 of total estimated population for adults and children, the total number of insured patient days and the insured days as a percent of total patient days in reporting hospitals, by province, 1960. It should be noted that the number of insured days includes only patient days for insured persons hospitalized in the home province and does not include insured patient days provided outside of the home province. Thus, the total number of patient days may include some insured patient days which were provided as out-of-province benefits.

The total days of care provided per 1,000 population (1,980.4) for nine provinces varied considerably from province to province, the lowest being the rate shown for Newfoundland (1,294.3) followed by Prince Edward Island (1562.4) and Nova Scotia (1,586.8), to the highest rate shown in Saskatchewan (2,315.3) closely followed by Alberta (2,200.0), while New Brunswick (1,862.7), Ontario (1,995.9), Manitoba (1,983.8) and British Columbia (1,992.2) were fairly close to the average for the nine provinces.

The relationship of insured days of beneficiaries hospitalized within the province to total patient days provided to all persons; varied from province to province, the lowest percent being shown in British Columbia (81.3%), followed by New Brunswick (84.7%) and Manitoba (85.9%), as compared to the high percentage shown in Saskatchewan (94.0%), followed by Newfoundland (90.5%), Alberta (89.4%), Nova Scotia (89.3%), and Prince Edward Island (87.5%). Ontario (86.8%) was very close to the average for nine provinces (87.1%) although the program in that province unlike the majority of programs is partially voluntary.

On comparing the 1960 volume of care per thousand population with the corresponding 1959 figures for the seven provinces for which reports were available in 1959*, it is noted that the utilization rate per thousand population for these provinces had increased from 1898.3 to 1989.8. Six of these provinces experienced increases, the greatest degree of increase occurring in Ontario (^{1811.6}~~1919.4~~ to 1995.9), British Columbia (from 1811.6 to 1992.2) and Manitoba (from 1898 to 1984.1). Utilization figures for Alberta hospitals decreased slightly (2227.6 to 2200.0).

There was no change from the previous year in the overall percent of insured days as a percent of total patient days for the

* RE-CALCULATED USING THE REVISED INTERCENSAL POPULATION ESTIMATES AS OF JUNE 1, 1959, DOMINION BUREAU OF STATISTICS.

TABLE VI

TOTAL PATIENT-DAYS DURING YEAR, INSURED PATIENT-DAYS DURING YEAR, INSURED PATIENT-DAYS AS A PERCENT OF TOTAL PATIENT-DAYS AND RATES PER 1,000. TOTAL POPULATION (1), ADULTS AND CHILDREN, IN HOSPITALS LISTED IN HOSPITAL INSURANCE AGREEMENTS, BY PROVINCE, 1960

PROVINCE	Number of Reporting Hospitals	Patient-Days During Year		Insured Patient-Days		
		Total	Rate per 1,000 Total Population (1)	Total	Rate per 1,000 Insured Population (2)	Insured Days as a Percent of Total Patient-Days
Newfoundland	40	579,867	1,294.3	524,556	1,148.0	90.5
Prince Edward Island	9	150,926	1,562.4	140,857	1,622.6	87.5
Nova Scotia	48	1,153,602	1,586.8	1,030,541	1,468.0	89.3
New Brunswick	38	1,097,127	1,862.7	929,674	1,780.1	84.7
Ontario	323	12,196,676	1,995.9	10,587,204	1,837.9	86.8
Manitoba	100	1,797,564	1,984.1 1,983.8	1,543,755	1,750.1	85.9
Saskatchewan	159	2,118,510	2,315.3	1,990,543	2,240.5	94.0
Alberta	121	2,840,181	2,200.0	2,540,354	1,997.1	89.4
British Columbia	112	3,191,467	1,992.2	2,595,285	1,628.2	81.3
Total (3)	950	25,135,920	1,980.4	21,882,869	1,808.0	87.1

(1) Based on Revised Intercensal Population Estimates as at June 1, 1960, Dominion Bureau of Statistics, Ottawa.

(2) Based on annual average number of insured persons under Provincial Plans, 1960, Health Insurance, Department of National Health and Welfare, Ottawa.

(3) Excluding Quebec, Yukon and Northwest Territories.

seven provinces reporting in 1959 (87.1%) and the nine provinces reporting in 1960 (87.1%). Province by province, however, there were several changes of greater or less significance. In 1959 both Newfoundland (93.4%) and British Columbia (85.8%) exceeded the 1960 percentages, (90.5% and 81.3% respectively) while Alberta showed an increase (from 84.9% to 89.4%) in the number of insured days as a percent of total patient days.

Table VII shows the number and percentage distribution of total patient days for adults and children by type of hospital and by province, 1960. The obvious relationship of the number of patient days to the number of beds and cribs set up, as set out in Table III, is reflected in the distribution of patient days between the budget review hospitals which account for 86.5% (19,500,651 days in general hospitals and 2,226,045 in other budget review hospitals) of the total of patient days (25,135,920) in all the hospitals reporting in nine provinces.

Something less than one-tenth (9.3%) of the total number of patient days (2,342,178) was in federal hospitals, the preponderance being shown in British Columbia (16.6%), Manitoba (12.5%), New Brunswick (11.0%), Nova Scotia (10.4%) and Alberta (10.3%).

A relatively small proportion of patient days (1,067,046) was accounted for in contract hospitals (4.2%). It will be noted that there were no contract hospitals in Prince Edward Island, Nova Scotia and New Brunswick and it should be recalled that reports for 1960 were not received for 38 nursing homes which provided insured services in 1960 in Alberta. The bulk of care in contract hospitals was in Ontario (923,297 days) and Newfoundland (97,262 days).

There is little change in the distribution pattern between 1959 and 1960. The percentage of patient days in general budget review hospitals decreased slightly (from 78.8% to 77.6%) while there was a slight increase in the percent of patient days in other budget review hospitals (from 8.7% to 8.9%). A slightly higher increase is evident in the percentage of patient days in contract hospitals (from 3.0% to 4.2%) but there is virtually no change in the experience of federal hospitals (from 9.5% to 9.3%).

TABLE VII

NUMBER AND PERCENTAGE DISTRIBUTION OF TOTAL PATIENT-DAYS DURING YEAR,
ADULTS AND CHILDREN, IN HOSPITALS LISTED IN HOSPITAL INSURANCE AGREEMENTS,
BY STATUS OF HOSPITAL AND BY PROVINCE, 1960

PROVINCE	Number of Hospitals Reporting	Status of Hospital				
		All Hospitals	Budget Review		Contract	Federal Government
			General	Other		
Number of Patient Days						
Newfoundland	40	579,867	477,788	—	97,262	4,817
Prince Edward Island	9	160,926	153,804	7,122	—	—
Nova Scotia	48	1,153,602	990,300	42,914	—	120,388
New Brunswick	38	1,097,127	951,100	25,537	—	120,490
Ontario	323	12,196,676	8,899,124	1,350,687	923,297	1,023,568
Manitoba	100	1,797,564	1,335,596	221,588	15,079	225,301
Saskatchewan	159	2,118,510	1,901,144	186,382	5,579	25,405
Alberta	121	2,840,181	2,259,396	285,750	3,169	291,866
British Columbia	112	3,191,467	2,532,399	106,065	22,660	530,343
Total(1)	950	25,135,920	19,500,651	2,226,045	1,067,046	2,342,178
Percent						
Newfoundland		100.0	82.4	—	16.8	0.8
Prince Edward Island		100.0	95.6	4.4	—	—
Nova Scotia		100.0	85.8	3.7	—	10.4
New Brunswick		100.0	86.7	2.3	—	11.0
Ontario		100.0	73.0	11.1	7.6	8.4
Manitoba		100.0	74.3	12.3	0.8	12.5
Saskatchewan		100.0	89.7	8.8	0.3	1.2
Alberta		100.0	79.5	10.1	0.1	10.3
British Columbia		100.0	79.3	3.3	0.7	16.6
Total(1)		100.0	77.6	8.9	4.2	9.3

(1) Excluding Quebec, Yukon and Northwest Territories.

Table VIII shows the numerical and percentage distribution of patient days of adults and children in standard, semi-private and private wards and the percentage of total patient days in budget review hospitals, by province for 1960, in reporting hospitals.

As might be expected, over two-thirds (70.5%) of total patient days provided (21,726,696) was in standard ward accommodation (15,325,456). Less than one-quarter (21.8%) was in semi-private accommodation (4,746,042) while a relatively small proportion (7.6%) was in private rooms (1,655,198).

Although the aggregate percentage of total patient days for the nine provinces was exceeded quite substantially by Newfoundland (88.9%) followed by Saskatchewan (87.0%), Alberta (83.7%), British Columbia and Manitoba (79.5%), Prince Edward Island (75.0%), the relatively low percentage of standard ward beds in Ontario (59.3%) had considerable effect on the overall picture. Both New Brunswick (70.6%) and Nova Scotia (70.3%) were at about the average for all the participating provinces.

Ontario provided a greater percentage of patient days in semi-private accommodation (31.6%), than any of the other provinces and was, in fact, the only province to exceed the average of the nine provinces (21.8%).

It is interesting to note that Nova Scotia provided a higher percentage of patient days in private wards (11.9%) than any other province and that Ontario, despite its relatively low percentage of standard ward days, provided a smaller percentage of patient days in private wards (9.1%). The relatively low extent to which the other provinces show patient days in private wards, however, reduced the aggregate to a fairly low percentage (7.6%).

The overall picture for the nine provinces in 1960, does not differ radically with that reported last year for seven provinces in 1959. There was a slight increase in the overall use of standard ward (from 69.7% to 70.5%) and a slight decrease in the use of semi-private (from 22.2% to 21.8%) and private accommodation (from 8.1% to 7.6%).

TABLE VIII

NUMBER OF ADULT AND CHILD PATIENT-DAYS IN STANDARD, SEMI-PRIVATE AND PRIVATE WARDS, AND PERCENTAGES OF TOTAL PATIENT-DAYS IN BUDGET REVIEW HOSPITALS, BY PROVINCE, 1960

PROVINCE	Number of Hospitals Reporting	Number of Patient-Days (Adults and Children)				Percentage of Total Patient-Days		
		Standard	Semi-Private	Private	Total Patient-Days	Standard	Semi-Private	Private
Newfoundland	25	424,758	32,287	20,743	477,788	88.9	6.8	4.3
Prince Edward Island	9	120,759	29,829	10,338	160,926	75.0	18.5	6.4
Nova Scotia	47	726,145	183,672	123,397	1,033,214	70.3	17.8	11.9
New Brunswick	36	689,962	191,814	94,861	976,637	70.6	19.6	9.7
Ontario	209	6,083,188	3,236,961	929,662	10,249,811	59.3	31.6	9.1
Manitoba	78	1,237,410	262,152	57,622	1,557,184	79.5	16.8	3.7
Saskatchewan	152	1,815,230	167,860	104,436	2,087,526	87.0	8.0	5.0
Alberta	112	2,129,958	285,676	129,512	2,545,146	83.7	11.2	5.1
British Columbia	91	2,098,046	355,791	184,627	2,638,464	79.5	13.5	7.0
Total ⁽¹⁾	759	15,325,456	4,746,042	1,655,198	21,726,696	70.5	21.8	7.6

(1) Excluding Quebec, Yukon and Northwest Territories.

Table IX shows the numerical and percentage distribution of patient days of adults and children in standard, semi-private and private wards and the percentage of total patient days in contract hospitals, by province for 1960, in reporting hospitals.

It will be noted that there were no contract hospitals reporting from Prince Edward Island, Nova Scotia and New Brunswick. The distribution of patient days in the contract hospitals is not unlike the distribution in the budget review hospitals shown in Table VIII, in that over two-thirds (72.9%) of the total patient days was standard ward accommodation (777,998) and less than one-quarter (23.8%) was in semi-private accommodation (253,633). The percentage of patient days in private accommodation (3.3%), however, accounted for a very small proportion of total days.

In Manitoba, Saskatchewan and Alberta (100%) and to a slightly reduced extent in Newfoundland (98.2%), practically all patient days in contract hospitals were provided on the standard ward level. In British Columbia (79.7%) and in Ontario (69.4%), however, there was less emphasis on standard ward care in contract hospitals; these two provinces had a substantial number of semi-private days and were the only two provinces to report any significant number of patient days in private accommodation.

The picture in contract hospitals reported last year for 1959 is less similar than that relating to budget review hospitals in that the percentage of patient days in standard ward accommodation in 1959 was considerably lower (52.7%) than that reported for 1960 (72.9%). The province of Ontario shows the most substantial change in this regard (from 43.8% to 69.4% for standard beds). For semi-private beds there has been a considerable decrease in the percentage shown for Ontario from 1959 (49.5% semi-private beds) to the rate shown in this table (27.0%).

British Columbia too shows a significant change in the number of patient days in semi-private accommodation from 1959 (5.2%) to that shown in this table (9.8%).

It might also be noted that the extent of patient days in private accommodation has been reduced in Ontario (from 6.7% to 3.6%) and increased in British Columbia (from 5.8% to 10.5%).

The aggregate picture shows substantial changes in standard ward (from 52.7% to 72.9%), semi-private (from 41.4% to 23.8%) and private accommodation (from 5.9% to 3.3%).

TABLE IX

NUMBER OF ADULT AND CHILD PATIENT-DAYS IN STANDARD, SEMI-PRIVATE AND PRIVATE WARDS,
AND PERCENTAGES OF TOTAL PATIENT-DAYS IN CONTRACT HOSPITALS, BY PROVINCE, 1960

PROVINCE	Number of Hospitals Reporting	Number of Patient-Days (Adults and Children)				Percentage of Total Patient-Days		
		Standard	Semi-Private	Private	Total Patient-Days	Standard	Semi-Private	Private
Newfoundland	14	95,488	1,774	-	97,262	98.2	1.8	-
Prince Edward Island	-	-	-	-	-	-	-	-
Nova Scotia	-	-	-	-	-	-	-	-
New Brunswick	-	-	-	-	-	-	-	-
Ontario	105	640,646	249,633	33,018	923,297	69.4	27.0	3.6
Manitoba	7	15,079	-	-	15,079	100.0	-	-
Saskatchewan	6	5,579	-	-	5,579	100.0	-	-
Alberta	40	168,631	-	14	168,645	100.0	-	-
British Columbia	15	18,051	2,226	2,383	22,660	79.7	9.8	10.5
Total ⁽¹⁾	187	943,474	253,633	35,415	1,232,522	● 76.5	20.6	2.8

(1) Excluding Quebec, Yukon and Northwest Territories.

Table X shows the number and percentage distribution of adult and child separations, by length of stay from date of admission and by province for budget review general hospitals in 1960. It will be noted that the highest percentage of separations (34.1%) was in the 4-7 days' stay since admission. The second largest group consists of the 1-3 days' stay (28.5%) while the long term 30 days or more group accounts for the smallest percentage (5.3%) of the categories considered in this table.

There is some variation between the provinces in the pattern of short stay cases, particularly in the percentage of separations with length of stay between one and three days since admission. In the one-day category, it will be noted that Ontario showed the highest percentage (11.9%), followed by Alberta (8.9%). In the two-day category Manitoba had the highest percentage (14.0%) followed by British Columbia (13.3%) while the three-day category was headed by Newfoundland (11.0%) followed by Prince Edward Island (10.9%). The largest percentage of the 1-3 days' stay is Alberta (30.5%) followed by Manitoba (30.2%). It is interesting to note that the lowest percentages in this category are in provinces providing more extensive out-patient services, the lowest being Prince Edward Island (25.3%) followed by New Brunswick (26.1%), Nova Scotia (26.8%) and Newfoundland (27.0%).

In the 30 day or more category the nine province average (5.3%) was exceeded by Newfoundland (6.5%) and Ontario (5.9%).

There appears to be little change in the percentage distribution in this table for 1960 for nine provinces from that reported previously for 1959 for seven provinces.

TABLE X

NUMBER AND PERCENTAGE DISTRIBUTION OF ADULT AND CHILD SEPARATIONS, BY LENGTH OF STAY FROM DATE OF ADMISSION, AND BY PROVINCE, BUDGET REVIEW GENERAL HOSPITALS, 1960

Length of Stay Since Admission	Newfoundland	Prince Edward Island	Nova Scotia (1)	New Brunswick	Ontario (1)	Manitoba	Saskatchewan (2)	Alberta	British Columbia	Total (3)
Number of Separations										
1 day	2,655	1,083	8,202	6,832	100,869	11,350	14,632	22,351	16,757	184,731
2 days	3,871	1,206	10,079	9,968	79,142	21,009	22,273	30,376	34,642	212,566
3 days	4,501	1,743	8,740	9,011	61,725	13,024	17,466	23,794	22,992	162,996
1-3 days	11,027	4,032	27,021	25,811	241,736	45,383	54,371	76,521	74,391	560,293
4-7 days	13,445	6,008	33,564	34,396	287,918	51,949	67,003	86,757	86,348	667,388
8-10 days	4,716	2,193	13,547	13,522	101,919	18,294	25,374	33,971	35,223	248,759
11-29 days	8,987	3,107	21,941	20,409	165,376	27,927	38,208	42,877	50,875	379,707
30 days or more	2,640	606	4,913	4,499	50,103	6,481	10,139	10,024	13,877	103,282
Total Separations	40,815	15,946	100,986	98,637	847,052	150,034	195,095	250,150	260,714	1,959,429
Percent										
1 day	5.5	6.8	8.1	6.9	11.9	7.6	7.5	8.9	6.4	9.4
2 days	9.5	7.6	10.0	10.1	9.3	14.0	11.4	12.1	13.3	10.8
3 days	11.0	10.9	8.7	9.1	7.3	8.6	9.0	9.5	8.8	8.3
1-3 days	27.0	25.3	26.8	26.1	28.5	30.2	27.9	30.5	28.5	28.5
4-7 days	32.9	37.7	33.2	34.9	34.0	34.6	34.3	34.7	33.1	34.1
8-10 days	11.6	13.8	13.4	13.7	12.0	12.2	13.0	13.6	13.5	12.7
11-29 days	22.0	19.5	21.7	20.7	19.5	18.6	19.6	17.1	19.5	19.4
30 days or more	6.5	3.8	4.9	4.6	5.9	4.3	5.2	4.0	5.3	5.3
Total Separations	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0
Number of Hos- pitals Reporting	25	8	44	33	187	74	149	101	86	707

(1) Based upon claims processed during period January 1 to December 31, 1960.

(2) For insured persons only.

(3) Excluding Quebec, Yukon and Northwest Territories.

Table XI shows the average length of stay from date of admission for adults and children separated from hospital, by bed size of hospital for budget review general and budget review chronic and convalescent hospitals, by province, 1960.

In the budget review general hospitals, it will be noted that the average for all hospitals in the nine provinces (9.8 days) was exceeded in the three size categories of hospitals of 300 beds and over, the longest (14.7 days) being shown in the largest hospital size group, followed by the 500-999 group (11.7 days) and the 300-499 group (10.8 days). The 200-299 size group, showed the same length of stay (9.8 days) as the average for all provinces, while each of the smaller size group hospitals showed a decreasing length of stay which appeared to be related to the size of the hospital. The consistent increase in the length of stay from the smaller to the larger hospitals appears to reflect the more limited facilities of the smaller hospitals. This pattern was also noted in the previous report in connection with 1959 returns.

The average length of stay in budget review general hospitals also varied from province to province, the shortest length of stay being reported by Manitoba (8.8 days) and the longest (11.6 days) being reported by Newfoundland. It should be noted, however, that the Newfoundland figure was affected by one hospital in which the length of stay was 30.9 days.

The average length of stay in budget review chronic hospitals (202.6 days) ranged very considerably between provinces, the shortest period being reported in a single hospital in Nova Scotia (24.6 days) to nine hospitals in Alberta (430.2 days) as slightly higher than average being shown for 21 chronic hospitals in Ontario (243.7 days).

The 1960 average length of stay for nine provinces shows comparatively little change from that reported in the previous report in connection with 1959 returns. The average length of stay in budget review general hospitals (9.7 days in 1959 compared to 9.8 days for 1960) reflects this similarity.

TABLE XI

AVERAGE LENGTH OF STAY FROM DATE OF ADMISSION FOR ADULTS AND CHILDREN
SEPARATED FROM HOSPITAL DURING YEAR (DISCHARGES AND DEATHS),
BY BED-SIZE OF HOSPITAL AND BY PROVINCE, BUDGET REVIEW
GENERAL AND CHRONIC AND CONVALESCENT HOSPITALS, 1960.

PROVINCE	Number of Hospitals Reporting	Bed-Size of Hospital (Rated Bed Capacity)									Total
		1- 9	10- 24	25- 49	50- 59	100- 199	200- 299	300- 499	500- 999	1000 and Over	
Budget Review General Hospitals											
Newfoundland	25	5.9	6.5	7.7	11.5	9.1	—	30.9	—	—	11.6
Prince Edward Island	8	—	6.4	7.9	—	9.8	9.7	—	—	—	9.1
Nova Scotia ⁽¹⁾	44	7.0	6.6	7.8	9.7	9.3	11.7	—	12.6	—	9.6
New Brunswick	33	6.2	6.9	7.7	8.2	9.3	9.2	11.5	16.5	—	9.6
Ontario ⁽¹⁾	187	5.8	7.4	9.1	9.5	8.9	9.8	10.3	11.6	14.3	10.2
Manitoba	74	7.6	6.7	7.1	8.2	8.6	7.9	9.2	11.5	—	8.8
Saskatchewan ⁽²⁾	149	7.2	7.3	7.7	8.4	10.3	13.4	12.2	14.4	—	9.8
Alberta	101	5.6	6.7	7.1	8.0	9.1	8.7	9.3	9.5	16.7	9.0
British Columbia	86	—	7.3	7.7	8.7	8.9	8.5	11.3	11.2	14.0	9.8
Total ⁽³⁾	707	6.9	7.0	7.8	8.8	9.0	9.8	10.8	11.7	14.7	9.8
Budget Review Chronic and Convalescent Hospitals											
Newfoundland	—	—	—	—	—	—	—	—	—	—	—
Prince Edward Island	—	—	—	—	—	—	—	—	—	—	—
Nova Scotia ⁽¹⁾	1	—	—	—	24.6	—	—	—	—	—	24.6
New Brunswick	—	—	—	—	—	—	—	—	—	—	—
Ontario ⁽¹⁾	21	—	—	104.2	115.2	282.4	171.6	464.0	394.0	—	243.7
Manitoba	4	—	—	—	36.9	58.5	—	—	105.6	—	84.6
Saskatchewan ⁽²⁾	—	—	—	—	—	—	—	—	—	—	—
Alberta	9	—	—	283.1	550.0	—	590.9	—	—	—	430.2
British Columbia	1	—	—	—	372.8	—	—	—	—	—	372.8
Total ⁽³⁾	36	—	—	178.3	110.5	184.2	187.1	464.0	241.5	—	202.6

(1) Based upon claims processed during period January 1 to December 31, 1960.

(2) For insured persons only.

(3) Excluding Quebec, Yukon and Northwest Territories.

Table XII (a) shows the percentage occupancy of total accommodation beds and cribs in budget review general hospitals by size of hospital and by province with respect to nine provinces and the two territories which were participating in the hospital insurance program by the end of 1960. Table XII (b) shows the percentage occupancy for standard ward and Table XII (c) shows the percentage occupancy for preferred accommodation.

It will be noted that the overall occupancy in 710 reporting hospitals was 80.0%, the three largest bed size groups all exceeding the average (88.8%; 86.1%; and 86.7%, respectively). It will also be noted that the percentage occupancy drops as the bed size of the hospital decreases, the 1-9 bed size group showing the lowest occupancy rate (53.0%).

There were also considerable variations between the provinces, excluding the Territories, with Prince Edward Island showing the lowest rate (67.9%) and New Brunswick the highest (85.1%). The low occupancy rates in the two hospitals in the Yukon (43.8%) and the single hospital in the Northwest Territories (48.6%) reflect the generally abnormal conditions in the north.

The percentage occupancy of both standard ward beds and preferred accommodation presents a similar picture with regard to hospital size. However, the percentage occupancy of standard ward beds (86.1%) varies from a low of 47.1% in the smallest hospitals to 91.4% in the largest, while the occupancy of the preferred accommodation varied from 9.1% to 83.9%, with an average of 69.1%.

TABLE XII(a)

PERCENTAGE OCCUPANCY⁽¹⁾ OF TOTAL ACCOMMODATION BEDS
AND CRIBS SET UP IN BUDGET REVIEW GENERAL HOSPITALS,
BY BED-SIZE OF HOSPITAL AND BY PROVINCE, 1960

PROVINCE	No. of Hospitals Reporting	Bed-Size of Hospital (Rated Bed Capacity)									Total
		1- 9	10- 24	25- 49	50- 99	100- 199	200- 299	300- 499	500- 999	1,000 and Over	
Total Accommodation											
Newfoundland	25	40.5	64.9	63.5	64.3	100.9	—	97.6	—	—	84.2
Prince Edward Island	8	—	53.9	64.8	—	76.2	60.8	—	—	—	67.9
Nova Scotia	44	40.5	64.5	75.0	77.8	82.3	77.3	—	91.0	—	79.5
New Brunswick	33	118.0	87.8	81.5	84.7	85.5	86.2	—	82.1	—	85.1
Ontario	187	34.0	64.9	69.9	76.2	81.4	76.5	85.4	85.8	88.7	81.7
Manitoba	74	64.6	58.8	67.1	73.1	67.1	83.6	84.1	88.2	—	76.8
Saskatchewan	149	53.1	64.0	72.5	79.1	79.8	88.1	88.9	81.4	—	76.4
Alberta	101	50.6	58.8	67.3	69.3	80.7	69.2	88.0	88.2	86.6	77.1
British Columbia	86	—	59.4	71.0	71.9	80.8	83.4	88.6	86.5	90.4	80.6
Yukon	2	—	43.8	—	—	—	—	—	—	—	43.8
Northwest Territories	1	—	—	48.6	—	—	—	—	—	—	48.6
Total (Excl. Quebec)	710	53.0	63.1	70.2	74.5	81.6	78.9	86.7	86.1	88.8	80.0

(1) Days as percentage of 366, times beds set up on December 31.

TABLE XII (b)
PERCENTAGE OCCUPANCY⁽¹⁾ OF STANDARD WARD BEDS AND CRIBS
SET UP IN BUDGET REVIEW GENERAL HOSPITALS, BY BED-SIZE
OF HOSPITAL AND BY PROVINCE, 1960

PROVINCE	Number of Hospitals Reporting	Bed-Size of Hospital (Rated Bed Capacity)								Total	
		1-9	10-24	25-49	50-99	100-199	200-299	300-499	500-999		1,000 and Over
Standard Ward											
Newfoundland	25	40.5	71.0	68.8	66.4	110.6	-	105.6	-	-	89.6
Prince Edward Island	8	-	76.2	88.3	-	96.9	85.5	-	-	-	90.5
Nova Scotia	44	41.2	70.5	89.8	91.3	90.8	87.9	-	91.2	-	87.9
New Brunswick	33	118.0	111.3	103.5	118.5	100.6	97.0	-	89.4	-	100.7
Ontario	187	12.7	112.7	77.5	80.3	88.4	81.9	92.7	91.2	89.0	87.3
Manitoba	74	64.6	59.7	72.4	82.2	78.6	102.9	85.1	88.2	-	79.8
Saskatchewan	149	54.7	69.2	83.6	100.8	89.7	103.8	92.9	82.2	-	83.4
Alberta	101	50.6	62.0	72.5	80.9	87.8	74.1	91.6	99.0	93.0	81.8
British Columbia	86	-	61.5	80.7	82.2	93.6	94.3	92.7	95.9	94.0	88.1
Yukon	2	-	46.6	-	-	-	-	-	-	-	46.6
Northwest Territories	1	-	-	48.6	-	-	-	-	-	-	48.6
Total (Excl. Quebec)	710	47.1	69.5	78.6	84.3	91.1	88.3	93.1	89.2	91.4	86.1

⁽¹⁾ Days as percentage of 366, times beds set up on December 31.

TABLE XII(c)

PERCENTAGE OCCUPANCY⁽¹⁾ OF PREFERRED ACCOMMODATION⁽²⁾
BEDS AND CRIBS SET UP IN BUDGET REVIEW GENERAL HOSPITALS,
BY BED-SIZE OF HOSPITAL AND BY PROVINCE, 1960

PROVINCE	Bed-Size of Hospital (Rated Bed Capacity)									
	1-9	10-24	25-49	50-99	100-199	200-299	300-499	500-999	1,000 and Over	Total
Preferred Accommodation (2)(3)										
Newfoundland	—	10.7	8.5	45.3	80.5	—	39.4	—	—	56.8
Prince Edward Island	—	15.6	22.1	—	46.7	41.0	—	—	—	39.8
Nova Scotia	0.0	37.8	45.6	55.9	70.7	58.9	—	90.7	—	65.0
New Brunswick	—	39.4	39.9	51.7	65.7	68.6	—	73.0	—	62.6
Ontario	7.4	77.7	58.4	71.3	74.3	70.8	77.6	80.1	88.3	75.3
Manitoba	—	29.4	28.6	43.7	42.4	52.5	82.6	88.4	—	68.8
Saskatchewan	20.5	28.1	40.1	29.6	55.7	56.5	74.5	77.5	—	51.0
Alberta	—	17.2	31.4	31.8	60.6	43.7	81.5	85.4	64.6	60.3
British Columbia	—	25.8	31.1	41.8	46.2	63.1	71.3	76.4	85.0	60.8
Yukon	—	11.7	—	—	—	—	—	—	—	11.7
Northwest Territories	—	—	—	—	—	—	—	—	—	—
Total (Excl. Quebec)	9.1	36.2	45.1	55.1	67.5	66.4	77.2	81.3	83.9	69.1

(1) Days as percentage of 366, times beds set up on December 31.

(2) Including private and semi-private beds and cribs set up on December 31.

(3) Excluding hospitals for which preferred accommodation not applicable.

Table XIII shows the number of persons employed or in training on a full-time basis in selected professional categories as at December 31, 1960. It will be noted that the number of hospitals reporting varies considerably from one professional group to another.

TABLE XIII
NUMBER OF PERSONS EMPLOYED FULL-TIME OR IN TRAINING FOR SELECTED PROFESSIONAL CATEGORIES,
IN HOSPITALS LISTED IN HOSPITAL INSURANCE AGREEMENTS, BY PROVINCE,
AS AT DECEMBER 31, 1960

Employment Category	Number of Full-time Employees											Total (Excl. Que.)
	Nfld.	P.E.I.	N.S.	N.B.	Ont.	Man.	Sask.	Alta. (1)	B.C. (2)	Yukon	N.W.T.	
Total Full-time Employees	40 2,884	9 860	48 6,945	38 6,123	323 63,360	99 9,305	159 10,121	121 13,312	111 14,852	3 146	21 265	972 128,173
Graduate Nurses (Including Supervisors)	38 423	9 185	48 1,689	37 1,227	319 13,073	91 1,653	152 2,009	120 2,944	111 3,894	3 48	17 54	945 27,199
Nursing Auxiliaries	40 540	9 142	47 903	36 1,357	293 14,258	80 2,216	151 2,038	116 2,881	98 2,666	1 22	11 43	884 27,066
Dietitians	5 5	2 2	21 43	11 27	120 284	11 33	11 26	26 56	36 84	— —	1 1	244 561
Medical Record Librarians	4 6	3 3	23 48	21 32	126 234	16 23	27 38	36 60	45 60	1 1	1 1	303 506
Laboratory and Radiological Technicians	26 117	6 19	37 243	24 142	181 2,212	30 337	111 458	87 425	69 571	2 6	2 3	575 4,533
Physiotherapists	4 10	4 9	6 15	9 23	88 243	8 28	11 32	18 60	21 72	1 1	— —	170 493
Occupational Therapists	3 3	— —	2 2	3 4	31 68	3 8	2 7	5 13	6 14	— —	— —	55 119
Pharmacists	3 5	3 4	13 18	8 11	95 195	15 32	17 35	15 34	17 40	— —	1 1	187 375
Social Workers (Medical and other)	2 2	— —	4 11	5 6	26 64	9 19	6 13	5 6	9 33	— —	— —	66 154
Student Nurses-in-training (including affiliates-in)	4 519	3 174	13 1,126	13 751	55 6,845	9 1,172	14 1,469	13 1,645	6 1,499	— —	— —	130 15,200
Interns and Residents	4 27	1 1	6 101	5 44	53 1,030	8 198	6 135	7 165	11 219	— —	— —	101 1,920

(1) Excluding 38 nursing homes for which data were not reported.

(2) Excluding one hospital for which data were not appropriately reported.

Table XIV shows the amount of revenue fund expenditures by type of account for budget review hospitals as reported in Part II of the Annual Return of Hospitals. Table XV shows the amount of these expenditures in terms of costs per patient day by type of account. Table XVI shows the expenditures in terms of per capita costs by type of account and Table XVII shows the percentage distribution of the expenditures by the type of account.

It should be noted that while these expenditures represent the total actual expenses, they may not precisely reflect those hospital costs which are shareable in accordance with the hospital insurance regulations. The actual shareable costs for 1960 were not completed during the fiscal year under review but it is anticipated that these will be included as approved in the forthcoming report for the next fiscal year. The total revenue fund expense for the 751 budget review hospitals which reported, was \$462,360,478. It will be noted that nearly two-thirds of this amount (64.6%) was for salaries and wages. On a per patient day basis the total revenue fund expenses varied from a low of \$16.74 in Prince Edward Island to a high of \$22.60 for British Columbia. The variation between the provinces appears most marked in the category of salaries and wages where the spread extends from a low of \$8.67 for Prince Edward Island to a high of \$15.34 for British Columbia, the average for all provinces being \$13.88 for this category.

The cost of medical and surgical supplies shows small variation between the provinces with an average cost of 74¢ for all provinces. The cost of drugs varies from a low of 77¢ in Alberta to a high of \$1.19 in Newfoundland.

The costs of raw food in Newfoundland per patient day (\$2.34) is also well above the national average for this item (\$1.43). However, it should be noted that the variations between provinces in raw food costs per patient day may not accurately reflect actual cost of food since there are variations between provinces and between hospitals in the number of hospital staff obtaining their meals in the hospital.

The expenses included under the heading "Other Supplies and Expense" are fuel, electricity, water, insurance, replacements of bedding and linen, laundry supplies, housekeeping and cleaning supplies, repairs to buildings, furniture and equipment, maintenance of physical plant, printing, postage, stationery, office supplies and telephones. The main items included under the heading "Other Revenue Fund Expense" are depreciation and interest.

TABLE XIV
AMOUNT OF REVENUE FUND EXPENDITURES BY TYPE OF ACCOUNT,
BUDGET REVIEW HOSPITALS, BY PROVINCE, 1960

PROVINCE	Number of Hospitals Reporting	Departmental Expense						Other Revenue Fund Expense	Total Revenue Fund Expense
		Salaries and Wages	Medical and Surgical Supplies	Drugs	Raw Food	Other Supplies and Expense	Total Departmental Expense		
Newfoundland	25	5,048,899	363,583	569,968	1,120,465	1,811,294	8,914,209	521,806	9,436,015
Prince Edward Island	8	1,333,588	86,238	129,942	242,473	497,893	2,290,154	285,082	2,575,236
Nova Scotia	47	12,835,999	896,059	927,174	1,927,770	4,178,915	20,765,917	1,392,744	22,158,661
New Brunswick	36	11,514,362	766,472	957,121	1,661,562	3,417,245	18,316,762	2,525,842	20,842,604
Ontario	209	150,913,386	7,750,063	9,769,654	14,300,042	30,851,743	213,584,888	15,988,522	229,573,410
Manitoba	78	21,260,533	1,092,248	1,665,945	1,963,310	4,377,444	30,359,480	2,008,990	32,368,470
Saskatchewan	145	25,384,723	1,162,311	1,632,918	2,417,729	5,375,049	35,972,730	2,756,599	38,729,329
Alberta	112	29,999,355	1,875,291	1,970,099	3,631,264	5,820,980	43,296,989	3,761,154	47,058,143
British Columbia	91	40,486,093	1,937,112	2,514,737	3,514,122	7,536,733	55,988,797	3,629,813	59,618,610
Total (1)	751	298,776,938	15,929,397	20,137,558	30,778,737	63,867,296	429,489,926	32,870,552	462,360,478

(1) Excluding Quebec, Yukon and Northwest Territories.

TABLE XV
REVENUE FUND EXPENDITURES PER PATIENT-DAY(1) BY TYPE OF ACCOUNT,
BUDGET REVIEW HOSPITALS, BY PROVINCE, 1960

PROVINCE	Departmental Expense						Other Revenue Fund Expense	Total Revenue Fund Expense
	Salaries and Wages	Medical and Surgical Supplies	Drugs	Raw Food	Other Supplies and Expense	Total Departmental Expense		
Newfoundland	10.57	0.76	1.19	2.34	3.79	18.65	1.09	19.75
Prince Edward Island	8.67	0.56	0.84	1.53	3.24	14.89	1.85	16.74
Nova Scotia	12.42	0.87	0.90	1.87	4.04	20.10	1.35	21.45
New Brunswick	11.79	0.78	0.98	1.70	3.50	18.75	2.59	21.34
Ontario	14.72	0.76	0.95	1.40	3.01	20.84	1.56	22.40
Manitoba	13.65	0.70	1.07	1.26	2.81	19.50	1.29	20.79
Saskatchewan	13.37	0.61	0.86	1.27	2.83	18.94	1.45	20.39
Alberta	11.79	0.74	0.77	1.43	2.29	17.01	1.48	18.49
British Columbia	15.34	0.73	0.95	1.33	2.86	21.22	1.38	22.60
Total(2)	13.88	0.74	0.94	1.43	2.97	19.95	1.53	21.47

(1) Patient-days during year for adults and children.

(2) See footnotes, Table XIV.

TABLE XVI
REVENUE FUND EXPENDITURES PER CAPITA (1) BY TYPE OF ACCOUNT,
BUDGET REVIEW HOSPITALS, BY PROVINCE, 1960

PROVINCE	Departmental Expense						Other Revenue Fund Expense	Total Revenue Fund Expense
	Gross Salaries and Wages	Medical and Surgical Supplies	Drugs	Raw Food	Other Supplies and Expense	Total Depart- mental Expense		
Newfoundland	11.27	0.81	1.27	2.50	4.04	19.90	1.16	21.06
Prince Edward Island	12.95	0.84	1.26	2.35	4.83	22.23	2.77	25.00
Nova Scotia	17.66	1.23	1.28	2.65	5.75	28.56	1.92	30.48
New Brunswick	19.55	1.30	1.62	2.82	5.80	31.10	4.29	35.39
Ontario	24.69	1.27	1.60	2.34	5.05	34.95	2.62	37.57
Manitoba	23.47	1.20	1.84	2.17	4.83	33.51	2.22	35.73
Saskatchewan	27.74	1.27	1.78	2.64	5.87	39.31	3.01	42.33
Alberta	23.24	1.45	1.53	2.81	4.51	33.54	2.91	36.45
British Columbia	25.27	1.21	1.57	2.19	4.70	34.95	2.27	37.22
Total ⁽²⁾ (9 provinces)	23.54	1.25	1.59	2.43	5.03	33.84	2.59	36.43

(1) Based on Revised Intercensal Population Estimates as at June 1, 1960, Dominion Bureau of Statistics.

(2) See footnotes, Table XIV.

TABLE XVII
PERCENTAGE DISTRIBUTION OF REVENUE FUND EXPENDITURES BY TYPE OF ACCOUNT,
BUDGET REVIEW HOSPITALS, BY PROVINCE, 1960

PROVINCE	Departmental Expense						Other Revenue Fund Expense	Total Revenue Fund Expense
	Salaries and Wages	Medical and Surgical Supplies	Drugs	Raw Food	Other Supplies and Expense	Total Departmental Expense		
Newfoundland	53.5	3.9	6.0	11.9	19.2	94.5	5.5	100.0
Prince Edward Island	51.8	3.3	5.0	9.4	19.3	88.9	11.1	100.0
Nova Scotia	57.9	4.0	4.2	8.7	18.9	93.7	6.3	100.0
New Brunswick	55.2	3.7	4.6	8.0	16.4	87.9	12.1	100.0
Ontario	65.7	3.4	4.3	6.2	13.4	93.0	7.0	100.0
Manitoba	65.7	3.4	5.1	6.1	13.5	93.8	6.2	100.0
Saskatchewan	65.5	3.0	4.2	6.2	13.9	92.9	7.1	100.0
Alberta	63.7	4.0	4.2	7.7	12.4	92.0	8.0	100.0
British Columbia	67.9	3.2	4.2	5.9	12.6	93.9	6.1	100.0
Total ⁽¹⁾	64.6	3.4	4.4	6.7	13.8	92.9	7.1	100.0

(1) See footnotes, Table XIV.

Conclusion:

In presenting this report the Minister of National Health and Welfare would like to express his great appreciation of the continuing co-operation of the provincial authorities and their staffs and for the manner in which they have worked together with the staffs of his own Department and other federal departments concerned with the hospital insurance program. He would also like to express his appreciation for the welcome co-operation of the hospital associations and the individual hospitals as well as to the medical profession and professional associations whose continuing assistance and collaboration have ensured the outstanding success of the hospital insurance program in Canada. The Minister would also like to commend the staff of his own Department for the manner in which they have carried out their own duties.



Canada.

Annual Report

of the Minister of National Health and Welfare

DISC 100

Under the

Hospital Insurance

and

Diagnostic Services Act



for the Fiscal Year Ended March 31, 1963

ANNUAL REPORT

OF THE MINISTER OF NATIONAL HEALTH AND WELFARE

ON THE OPERATION OF

AGREEMENTS WITH THE PROVINCES

UNDER THE

HOSPITAL INSURANCE AND DIAGNOSTIC SERVICES ACT

FOR THE FISCAL YEAR ENDED

MARCH 31, 1963

INDEX OF TABLES

		PAGE
TABLE A	- Number of Insured Persons on March 31, 1963 by Province as Reported for Purposes of Advance Payments	12
TABLE B	- Net Population Certified by the Dominion Statistician, by Province as Used for Calculation of Per Capita Costs and for Making Advance Payments to Non-Premium Provinces	13
TABLE C	- Summary of Payments Made by Canada to Participating Provinces, by Province, 1962-63 Fiscal Year	16
TABLE D	- Payments by Canada - Fiscal Year 1958-59, 1959-60, 1960-61, 1961-62, 1962-63, and Total Payments July 1, 1958 - March 31, 1963	18
TABLE E	- Contributions by Canada - with Respect to July 1, 1958 to March 31, 1963 by Province and by Calendar Year	19
TABLE F	- Cost of In-Patient Services, 1960; Net Population June 1, 1960 Total and 25% Per Capita Cost, 1960, by Province	21
TABLE G	- Contribution by Canada With Respect to In-Patient Services, 1960	22
TABLE H	- Contribution by Canada with Respect to Out-Patient Services, 1960	23
TABLE J	- Total Contributions and Final Payments by Canada, 1960	24
TABLE K	- Cost of In-Patient Services by Province, 1960 for Provinces Which Participated for the Complete Year	25

1000 900 800 700 600 500 400 300 200 100 0

INDEX OF TABLES (Cont'd)

	<u>PAGE</u>
TABLE 1	- Total Patient Days During Year, Insured Patient Days During Year, Insured Patient Days as a Percent of Total Patient Days, and Rates Per 1,000 Total and Insured Population, Adults and Children, Canada, 1959-1961 30
TABLE 2	- Total Patient Days During Year, Admissions, Separations and Average Length of Stay, Adults and Children, in Reporting Hospitals Listed in Hospital Insurance Agreements, and Rates Per 1,000 Population, Canada, 1959-1961 32
TABLE 3	- Number of Hospitals and Other Facilities Listed in Hospital Insurance Agreements, Beds and Cribs Set up on December 31, and Rate Per 1,000 Population in Participating Provinces, Canada, 1959-1961..... 33
TABLE 4	- Total Patient Days During Year, Admissions During Year, and Beds Set up on December 31, Per 1,000 Population, Adults and Children, in Hospitals Listed in Hospital Insurance Agreements, by Province, 1961..... 35
TABLE 5	- Number and Percentage Distribution of Hospitals and Other Facilities Listed, Beds and Cribs Set up, on December 31, and Patient Days During Year, Adults and Children, in Hospitals Listed in Hospital Insurance Agreements, by Status of Hospital, Canada, 1961 36
TABLE 6	- Budget Review Hospitals: Number and Percentage Distribution of Beds and Cribs Set up by Type of Unit, Canada, December 31, 1961 38
TABLE 7	- Budget Review Hospitals: Number and Percentage Distribution of Patient Days During Year, Beds and Cribs Set up on December 31, and Percentage Occupancy, by Type of Accommodation, Adults and Children, Canada, 1961 40

INDEX OF TABLES (Cont'd)

		<u>PAGE</u>
TABLE 8	- Budget Review General Hospitals: Number of Beds and Cribs Set up on December 31, Average Length of Stay, and Percentage Occupancy, by Bed- Size of Hospital, Canada, 1961.....	41
TABLE 9	- Budget Review Chronic and Convalescent Hospitals: Number of Beds and Cribs Set up on December 31, Average Length of Stay, and Percentage Occupancy, by Bed- Size of Hospital, Canada, 1961.....	42
TABLE 10	- Contract and Federal Hospitals: Number and Percentage Distribution of Beds and Cribs Set up on December 31 by Type of Unit, Average Length of Stay, and Per- centage Occupancy, Canada, 1961.....	43
TABLE 11	- Hospitalization by Age and Sex for In- Patients Insured by Provincial Plans in Eight Provinces and Two Territories, 1961	45
TABLE 12	- Hospitalization by Residence for In-Patients Insured by Provincial Plans in Five Pro- vinces.....	48
TABLE 13	- Hospitalization by Diagnosis for Adult and Child In-Patients Insured by Provincial Plans in Six Provinces and Two Territories, 1961	52
TABLE 14	- Number of Persons Employed Full-Time in Hospitals Listed in Hospital Insurance Agreements, by Province, as at December 31, 1959, 1960 and 1961.....	60
TABLE 15	- Total Paid Hours of Work Per Patient-Day in Budget Review General Hospitals, by Province, 1959, 1960, 1961	61
TABLE 16	- Total Paid Hours of Nursing and Other Personnel Per Patient-Day in Budget Review General Hospitals, by Province, 1959, 1960, 1961.....	62

INDEX OF TABLES (Cont'd)

	<u>PAGE</u>
TABLE 17 - Revenue Fund Expenditures of Budget Review Hospitals, by Province, 1959 - 1961	64
TABLE 18 - Revenue Fund Expenditures of Budget Review Hospitals Per Patient Day, by Province, 1959 - 1961	65
TABLE 19 - Revenue Fund Expenditures of Budget Review Hospitals per Capita, by Province, 1959 - 1961	66

TABLE A1 - Insured Patient Days During Year, Within Respective Provinces, and Rates Per 1,000 Insured Population, Adults and Children, by Province, 1959 - 1961	70
TABLE A2 - Total Patient Days During Year, in Hospitals Listed in Hospital Insurance Agreements, Adults and Children, Number and Percentage Distribution, by Responsibility for Payment, by Province, 1961	72
TABLE A3 - Total Patient Days During Year, Admissions, Separations, Adults and Children, in Hospitals Listed in Hospital Insurance Agreements, and Rates per 1,000 Population, by Province, 1961	74
TABLE A4 - Number of Beds and Cribs Set up on December 31, and Rates Per 1,000 Population, in Hospitals Listed in Hospital Insurance Agreements, by Province, 1959-1961	75
TABLE A5 - Number and Percentage Distribution of Hospitals and Other Facilities Listed in Hospital Insurance Agreements, by Status of Hospital, by Province, December 31, 1961	76

INDEX OF TABLES (Cont'd)

	<u>PAGE</u>
TABLE A6 - Number and Percentage Distribution of Beds and Cribs Set up, on December 31, in Hospitals Listed in Hospital In- surance Agreements, by Status of Hospital, by Province, 1961	77
TABLE A7 - Number and Percentage Distribution of Patient Days During Year, Adults and Children, in Hospitals Listed in Hospital Insurance Agreements, by Status of Hospital, by Province, 1961	78
TABLE A8 - Budget Review Hospitals: Number and Percentage Distribution of Patient Days During Year, Adults and Children, and Percentage Occupancy, by Type of Accommodation, By Province, 1961	79
TABLE A9 - Budget Review General Hospitals: Percentage Occupancy by Bed-Size of Hospital and by Province, 1961	80
TABLE A10 - Budget Review General Hospitals: Average Length of Stay, Adults and Children, by Bed-Size of Hospital and By Province, 1961	81
TABLE A11 - Budget Review Chronic and Convalescent Hospitals: Beds Set up on December 31, Average Length of Stay, and Percentage Occupancy by Province, 1961	82
TABLE A12 - Contract and Federal Hospitals: Number of Beds and Cribs Set up, on December 31, by Type of Unit, By Province, 1961...	83
TABLE A13 - Contract and Federal Hospitals: Average Length of Stay and Percentage Occupancy, by Province, 1961	84

INDEX OF TABLES (Cont'd)

	<u>PAGE</u>
TABLE A14 - Hospitalization by Age and Sex,	
Newfoundland, 1961	85
Prince Edward Island, 1961	86
Nova Scotia, 1961	87
New Brunswick, 1961	88
Quebec, 1961	89
Ontario, 1961	90
Saskatchewan, 1961	91
British Columbia, 1961	92
Yukon, 1961	93
Northwest Territories, 1961	94
TABLE A15 - Hospitalization by Residence,	
Newfoundland, 1961	95
Prince Edward Island, 1961	96
New Brunswick, 1961	97
Ontario, 1961	98
Saskatchewan, 1961	99
British Columbia, 1961	100
TABLE A16 - Revenue Fund Expenditures of Budget Review Hospitals, by Type of Account, by Province, 1961	101
TABLE A17 - Revenue Fund Expenditures Per Patient- Day of Budget Review Hospitals, by Type of Account, by Province, 1961	102
TABLE A18 - Revenue Fund Expenditures Per Capita of Budget Review Hospitals, by Type of Account, By Province, 1961	103
TABLE A19 - Percentage Distribution of Revenue Fund Expenditures of Budget Review Hospitals by Type of Account, by Province, 1961 ...	104

ANNUAL REPORT
of the
MINISTER OF NATIONAL HEALTH AND WELFARE
on the operation of
Agreements with the Provinces
under the
Hospital Insurance and Diagnostic Services Act
for the fiscal year ended March 31, 1963.

This is the fifth report to Parliament as required by Section 9 of the Hospital Insurance and Diagnostic Services Act and it is made with respect to the operation of the Agreements under the Act for the fiscal year ended March 31, 1963. It should be noted that during the year under review the present government had not as yet assumed office. Although it is the second report for a period during which all of the provinces and territories were participating in the hospital insurance program for the whole year under review, it is the first report which contains statistical data relating to the experience of participating hospitals in all of the provinces for a full calendar year.

It will be recalled that in previous reports it was explained that, while federal contributions to the provinces are voted by Parliament on the basis of a fiscal year, the amounts of the payments to the hospitals, as well as utilization statistics reported by the hospitals, are based on a calendar year. The statistical data relating to utilization contained in this report relate to the calendar year 1961 while the data relating to federal contributions, including the numbers of insured persons, relate to the fiscal period under review, the year ended March 31, 1963.

It will be noted that this report is divided into two separate parts, the first dealing with those matters relating to the fiscal year under review, and the second part containing the statistical data relating to the calendar year 1961. In the first part an outline is given of amendments to Agreements which have been made during the year, in accordance with changes made in provincial laws or administrative arrangements; an outline of the activities of the Advisory Committee on Hospital Insurance and Diagnostic Services and its Subcommittees and Working Parties; an outline of the basic provisions of the federal and provincial legislation relating to hospital insurance; a description of and statistical data relating to the number of persons covered by hospital insurance programs; and an outline of the statutory basis for federal contributions and

advance payments made to the provinces in accordance with the Agreements. In the second part of the report statistical data derived from the Annual Return of Hospitals for 1961 are presented and analyzed.

Amendments to the Agreements

As in previous years, the majority of the amendments to the Agreements related to the listing of hospitals participating in the provincial programs. In addition to the routine inclusion of new hospitals not previously providing insured services, a number of nursing homes providing an acceptable level of care for long-term patients and included in the Agreements on a temporary basis, were relisted for another temporary period.

The most important amendments made to the Section of the Agreement relating to insured services were the out-patient services provided by Quebec. With effect from October 1, 1962 psychiatric day care and night care was made available on an out-patient basis in a number of named general hospitals in the province and electroshock and insulinshock therapy was also provided on an out-patient basis when provided in the psychiatric department of general hospitals throughout the province. Commencing November 1, 1962, Quebec also provided as out-patient services, emergency care within 24 hours of an accident, permitting the Minister of Health to extend this period in cases where the patient was prevented by circumstances from receiving emergency care within that time. From the same date Quebec commenced to provide minor surgical procedures as specified from time to time by the Minister of Health, as insured out-patient services. These procedures include any necessary radiological and laboratory examinations, including the examination of tissue, together with necessary interpretations.

There were some amendments made in connection with insured out-patient services in New Brunswick but these did not entail substantial change in the insured out-patient services previously provided.

Discussion concerning an amendment to the Saskatchewan Agreement relating to insured out-patient services were proceeding at the end of the fiscal year under review. These will reflect changes which have been made with regard to the out-patient services now provided under the provincial law.

An amendment was made in the Nova Scotia Agreement relating to the out-of-province benefits made available to residents of Nova Scotia during a temporary absence from the province. The original limitation of three months in a period of 12 consecutive months, was removed.

The Alberta Agreement was also amended so as to reflect a revision of provincial arrangements for the recovery of costs of insured services in cases of third party liability in that province.

There was a complete revision of the part of the Agreement pertaining to the Scheme for Administration, in the Agreements with New Brunswick and Manitoba. The New Brunswick revision was made to reflect, retroactively to April 1, 1961, changes in provincial administration, consequent on new legislation to which reference has been made in previous reports to Parliament. It will be recalled that New Brunswick had changed its administration by eliminating the Commission originally established for the provincial program, and by changing from a premium system of financing to a non-premium system.

The new Manitoba Scheme for Administration reflects the change in that province resulting from the establishment of a Commission to administer the provincial program. It also included an earlier amendment relating to a hospital pension plan for hospital employees in Manitoba.

At the end of the fiscal year under review amendments to the Prince Edward Island Agreement were still pending, consequent to the change from a premium method of financing to a program of universal coverage.

Advisory Committee on Hospital Insurance and Diagnostic Services, its Subcommittees and Working Parties

A tradition of close co-operation between the federal and provincial governments in matters relating to the hospital insurance and diagnostic services program, was initially established prior to the commencement of the joint program in July, 1958. During the early stages of the program, federal-provincial technical conferences on hospital insurance were convened in Ottawa. These conferences were attended by representatives of all the provincial governments, including governments not yet participating in the joint program. Between December 1957 and April 1959, four technical conferences were held, and a number of working parties appointed by the conferences carried out a considerable amount of preparatory work particularly with regard to financial forms and statistical returns. Discussions were held at the conferences on a wide variety of topics relating to matters of mutual concern. The keen interest of the provinces in these conferences was reflected in the expanding attendance at the meetings.

While the large attendance at the technical conferences reflected the active interest of the provinces in joint consultation, it also precluded the type of discussion which may only be achieved in a body of considerably more modest dimensions. It was recognized, however, that the device

for federal-provincial exchange of views was one which should be maintained to the mutual benefit of all concerned. For this reason, the Minister of National Health and Welfare, with the concurrence of his Cabinet colleagues and the agreement of the provincial Ministers, established a permanent Advisory Committee on Hospital Insurance and Diagnostic Services.

The provinces were invited to name not more than two representatives each as members of the Advisory Committee, whose chairman is the Director of Health Services and co-chairman is the Principal Medical Officer, Health Insurance. The Deputy Minister of Health is an ex-officio member while other members of the Committee are the chairmen of the sub-committees. The Advisory Committee has met twice yearly since its appointment.

The Committee set up three sub-committees to deal with specific subjects and the provinces were invited to name to the sub-committees persons of particular technical competence in the sub-committees field of work. The subcommittees which were appointed were: Sub-committee on Quality of Care, Research and Statistics; Sub-committee on Finance and Accounting; and Sub-committee on Residence and Uniformity of Benefits.

In order to expedite work with regard to specific problems, the sub-committees set up working parties charged with specific tasks; for example, the formulation of standard definitions and standard tabulations to be used by all provinces in order to provide provincial data which would be readily comparable on a national basis; and the formulation of guides in connection with standards of care in hospitals.

The Advisory Committee on Hospital Insurance and Diagnostic Services held two meetings during the year under review, the first of these being held on April 9 and 10 and the second November 5 and 6, 1962. In addition to a fairly long agenda relating to technical problems of interest to provincial and federal authorities and discussions of the reports of various bodies related to the Advisory Committee, a part of the first meeting was devoted to a discussion of management efficiency by planning hospital design. Mr. Gordon Friesen of Gordon A. Friesen Associates of Washington, D.C., addressed the Committee and, illustrating his talk with a series of slides, he demonstrated means of effecting economies while providing higher standards in hospitals, by means of planning hospital design.

The Subcommittee on Quality of Care, Research and Statistics, held its fourth meeting on February 21 and 22, 1963 at which it dealt primarily with matters referred to it by the parent body. Among the Working Parties of this Subcommittee which met during the year were the Working Party

on Operational Research which held a meeting on October 23 and 24, 1962 and a Working Party on Laboratory Unit Values which met September 27 and 28, 1962.

The Working Party on Operational Research was established with a view to identifying areas in the hospital field in which operational research was felt to be desirable; for outlining the methods which might be utilized in making studies; and to set up priorities.

The Working Party on Laboratory Unit Values held a meeting September 27 and 28, 1962 with a view to formulating recommendations which would lead to the adoption of a standard system of laboratory unit values in all provinces. The Working Party set up a small continuing group under the chairmanship of Dr. M.O. Klotz, Chief Pathologist at the Ottawa Civic Hospital.

The Working Parties on Canadian Building Standards for Hospitals and Health Facilities met on April 2 and 3, 1962 and on April 4, 1962. An ad hoc working party established by the Subcommittee on Finance and Accounting to examine a problem related to the revenue of hospitals, held meetings in September and October 1962 and their report was subsequently adopted by the parent body.

Summary of Programs as at the End of the Year

It will be recalled that in previous reports outlines have been given of the provincial hospital insurance programs for which provisions were made in the Agreements under the Hospital Insurance and Diagnostic Services Act. Amendments to these programs as reflected in amendments to the Agreements have also been noted in previous reports. It has been considered that a useful purpose may be achieved on the occasion of this fifth report on the operation of the Agreements, briefly to summarize the major provisions of the programs as in force at the conclusion of the year under review.

Scope of Services

Since it is a primary requisite for the signing of an agreement that a province provide on equal terms and conditions the in-patient services specified in the federal law, all of the provinces have undertaken to provide the following as insured in-patient services:

- (i) accommodation and meals at the standard or public ward level,
- (ii) necessary nursing service,

- (iii) laboratory, radiological and other diagnostic procedures together with the necessary interpretations for the purpose of maintaining health, preventing disease and assisting in the diagnosis and treatment of any injury, illness or disability,
- (iv) drugs, biologicals and related preparations as provided in an agreement,
- (v) use of operating room, case room and anaesthetic facilities, including necessary equipment and supplies,
- (vi) routine surgical supplies,
- (vii) use of radiotherapy facilities where available,
- (viii) use of physiotherapy facilities where available,
- (ix) services rendered by persons who receive remuneration therefor from the hospital, and
- (x) such other services as are specified in an agreement.

While the federal law authorizes the Minister to enter into an agreement to make contributions towards the costs of these services on an out-patient basis, the law is permissive in this regard and the provinces were free to choose which, if any, out-patient services they proposed to provide as insured services. At the end of the fiscal year under review, the following was the situation with regard to insured out-patient services:

Alberta did not provide any out-patient services under the joint federal-provincial program. In the agreement with British Columbia, no out-patient services were listed at the request of the province. Nevertheless, emergency services and minor surgical procedures are included in the provincial program on payment of a \$2 charge.

A common feature of out-patient services provided in most of the provinces, is the provision of a fairly broad range of services in the event of an accident. In Ontario, these are provided within a period of 24 hours after an accident, while this period may be extended in Manitoba, Quebec, the Northwest Territories and the Yukon. In Nova Scotia and New Brunswick, emergency services are provided within a period of 48 hours of an accident, and follow-up care is included for a period of 90 days after an accident in New Brunswick. In Saskatchewan the emergency services include subsequent changes of casts or dressings or removal of casts or sutures required as a consequence of an injury treated in the hospital or in the out-patient department. Ontario also provides follow-up care in fracture cases.

The majority of provinces provide additional out-patient services although in the Yukon only emergency services are insured for the time being. The Northwest Territories provide certain diagnostic procedures and necessary interpretations.

In Saskatchewan out-patient services include the pathological examination of tissue; cancer services; and the examination of and report on clinical and diagnostic specimens, by the provincial laboratories. These services are being extended to include all laboratory and radiological procedures; physiotherapy and radiotherapy facilities and surgical procedures.

Manitoba also provides minor surgical procedures as designated; certain medical rehabilitation procedures; and electroshock therapy.

Ontario provides certain medical and surgical therapeutic procedures in specified hospitals and in those cases where the procedure ordinarily would be carried out as an in-patient service.

As mentioned above, Quebec now provides minor surgical procedures as specified from time to time, including necessary radiological and laboratory examinations which are directly related to these procedures, along with the examination of tissues together with the necessary interpretations. Quebec out-patient services also include psychiatric day care and night care in psychiatric departments of certain specified hospitals. In addition, electroshock and insulin shock therapy are insured services when provided in psychiatric departments of general hospitals in the province.

In New Brunswick, hospital services and facilities when provided for diagnostic and treatment procedures as authorized from time to time, including the use of the operating room; the use of surgical equipment and supplies; drugs and related preparations; and laboratory, radiological and other diagnostic procedures together with the necessary interpretations; are all insured out-patient services. Laboratory procedures when referred by a physician are insured services where approved facilities are available. Physiotherapy facilities where available are also included as insured out-patient services.

Nova Scotia provides a wide range of out-patient services in addition to the emergency services in accident cases mentioned above. The services of the tumour clinic and laboratory tests from time to time specified by the Commission, together with necessary interpretations, are insured. The province also includes as insured out-patient services all medically necessary diagnostic radiological examinations. In addition, treatment facilities where available are insured for radiotherapy and physiotherapy.

Minor, medical and surgical procedures and the provision of blood including blood fractions are also insured out-patient services.

Prince Edward Island provides laboratory and radiological procedures, as specified, including the use of radioactive isotopes; drugs, biologicals and related preparations for emergency diagnosis and treatment; and all of the other services prescribed as in-patient services in the federal Act.

In Newfoundland, selected diagnostic and treatment procedures are provided as insured out-patient services.

Methods of Provincial Financing

Since the provinces were free to devise their own methods for financing the provincial share of costs, a variety of methods of financing has emerged. Five provinces initially used a premium method, but two of these subsequently switched to general revenue; one province levied a hospital tax while another levies a property tax. Other provinces finance their share of costs out of general revenue and, in some instances, a combination of methods is used.

The premium method is used in Saskatchewan, Manitoba and Ontario. It had been used in New Brunswick and Prince Edward Island but it was abolished in the former from January 1, 1961 and the latter from December 1, 1962.

The annual premium, or hospitalization tax as it is called, in Saskatchewan was \$17.50 for single persons and \$35.00 for families, but was increased to \$24 and \$48 respectively from January 1, 1961. The funds derived from the hospitalization tax are augmented by general revenue funds.

The Manitoba monthly premium which was \$2.05 for single persons and \$4.10 for families was increased to \$3.00 and \$6.00 respectively in June 1960. From January 1962 it was reduced to \$2.00 and \$4.00; at the same time, a 6% charge on personal income tax and an extra 1% tax on taxable income of corporations, were levied to provide for the provincial costs not covered by the premiums. A compulsory payroll deduction is applied for employed groups of three or more persons. Provision is also made to exempt from this group certain categories of persons for such reasons as temporary or part-time employment.

The Ontario monthly premium of \$2.10 for single persons and \$4.20 for families, entitles insured persons in Ontario to insured services and, in addition, to services over and above those included in the agreement under the Hospital Insurance and Diagnostic Services Act. The provincial program in that province includes insured services in mental hospitals

and tuberculosis sanatoria. There is a compulsory payroll deduction clause in the Ontario law in relation to establishments of fifteen or more employees including the employer. Unlike the majority of provinces, this category of residents is the only category with respect to whom insurance coverage is compulsory in the province.

In all the premium provinces, reduced premium rates are levied with respect to the families of armed services personnel and members of the Royal Canadian Mounted Police.

British Columbia finances the provincial share of costs out of the general revenue of the province. Part of a provincial sales tax is paid into the general revenue fund for hospital insurance. A similar method of financing is used in Quebec, New Brunswick, Prince Edward Island, Newfoundland, the Yukon and the Northwest Territories. Both British Columbia and the Northwest Territories supplement this source of revenue by the levy of authorized charges discussed below. Alberta raises a portion of its share of costs from a mill rate levied on property as well as levying an authorized charge.

When the Hospital Insurance and Diagnostic Services program came into operation in Nova Scotia, a three per cent hospital tax was also inaugurated and the funds derived from this sales tax are used to finance the provincial share of costs. The tax was increased to five per cent from January 1st, 1961.

Only three provinces have included in their Agreement, provisions for levying charges directly to patients for insured services. These deterrent or co-insurance charges, described in the law as authorized charges are related to in-patient services in British Columbia, where a charge of \$1.00 per day of hospital care is imposed; in Alberta, where the charge varies between \$1.50 and \$2.00 per day (\$1.00 per day for a newborn), depending upon the category of the hospital; and in the Northwest Territories where a charge of \$1.50 per day of hospital care is imposed. The charge of \$2.00 referred to above in connection with the out-patient services in British Columbia, is not a part of the joint federal-provincial program.

Number of Insured Persons

The methods for determining the number of insured persons in a province and outlined in the Agreements, differ from province to province, since the methods used by the provinces to finance the provincial share of costs have a direct bearing on the availability of an actual count of insured persons. In the three provinces which levy premiums, insured persons are registered and identification certificates are provided.

However, even in these circumstances the methods of registration differ. In Ontario and Manitoba, registration is for single persons and for the family head, but no actual count of the number of dependents of the family head is made. In order, therefore, to calculate the average number of persons in the province who are eligible for and entitled to insured services, a number which is required in connection with the federal contribution to the provinces, an estimate of the average number of dependents in these two provinces is made by the Dominion Statistician. In Saskatchewan the registration method used by the province consists of a head count including dependents.

Coverage is automatic or compulsory in all provinces except Ontario where persons employed in an undertaking having a total of 15 or more employed persons are the only mandatory groups, coverage being voluntary for the remaining population.

In provinces where no premiums are levied and where the provincial share of costs is paid out of general revenue, sales or property tax, no individual registration of insured persons is required and coverage is universal. Insofar as these provinces are concerned, provision was made in the Agreements for calculation on the basis of a population estimate for a given date in the year (June 1) as determined by the Dominion Statistician.

The Hospital Insurance Regulations define "population" to mean the population of Canada or of the province, as certified by the Dominion Statistician, and, calculated for a calendar year in which a census was taken, as the population of Canada or of the province as ascertained by the census; for other than a census year, the population of Canada or of the province on the 1st day of June in that year according to published original intercensal estimates of the Dominion Statistician.

There are certain categories of persons with respect to whom hospital services are provided under a statute other than the hospital insurance legislation, who are therefore not entitled to insured services. For the most part, these consist of members of the Armed Forces and the Royal Canadian Mounted Police. In addition, inmates of federal penitentiaries are provided with hospital services by the federal government. In the D. B. S. population estimates, therefore, the number of the members of the regular forces, members of the Royal Canadian Mounted Police and persons serving terms of imprisonment in a federal penitentiary are deducted so as to provide a "net" population figure for the purpose of calculating the eligible population.

Table A shows by province, the number of insured persons on March 31, 1963 as reported for purposes of advance payments; the advance estimate of net population as of June 1, 1963 as certified by the Dominion Statistician; and the percentage of insured persons out of total net population at the end of the fiscal year under review. It will be noted that in all but three provinces, all of the net population was entitled to insured services at the end of the year. The percentage of population covered in Prince Edward Island immediately prior to the amendment in the provincial program which became effective December 1, 1962, was approximately 85% of the net population.

At the end of the year under review coverage was compulsory or automatic in all provinces with the exception of Ontario, as noted above. Nevertheless, in spite of the partially voluntary aspect of that program, it will be noted that 96.7% of the net population was insured at the end of the year under review.

Table B shows, by province, the net population as certified by the Dominion Statistician, which was used for the calculation of the per capita cost of insured services, on which the federal contribution is partially based, and in connection with payments to non-premium provinces. The first column which shows the population based on an advance estimate for June 1, 1962 totalling 18,396,000 was used for calculating advance payments to non-premium provinces for April and May 1962, was also used for calculating the estimated national per capita cost for the calendar year 1962.

The second column showing a total of 18,429,000 is the net population based on the original published intercensal estimate and was used for the purpose of calculating advance payments to non-premium provinces for the months from June to December inclusive, during the calendar year 1962.

The third column shows the estimated population, based on an advance estimate for June 1, 1963 and totalling 18,780,000, was used for calculating the advance payments to non-premium provinces for the months of January to March inclusive for the calendar year 1963.

Federal Contributions

The amount of the federal contributions to the provinces is calculated on the basis of a formula contained in the Hospital Insurance and Diagnostic Services Act. It has been designed in such a way as to provide greater federal assistance to those provinces in which the per capital cost of hospital care is lower and to provide for an equitable federal contribution to the provinces, having regard to the considerable variation in the per capita costs between the provinces.

TABLE A

NUMBER OF INSURED PERSONS ON MARCH 31, 1963
BY PROVINCE
AS REPORTED FOR PURPOSES OF ADVANCE PAYMENTS

PROVINCE	Number of Insured persons March 31, 1963	Advance Estimate of Net Population June 1, 1963	Percentage of Persons Insured
Newfoundland	481,000	481,000	100
Prince Edward Island	105,000	105,000	100
Nova Scotia	733,000	733,000	100
New Brunswick	605,000	605,000	100
Quebec	5,465,000	5,465,000	100
Ontario	6,188,741	6,401,000	96.7
Manitoba	904,631	941,000	96.1
Saskatchewan	911,661	924,000	98.7
Alberta	1,398,000	1,398,000	100
British Columbia	1,687,000	1,687,000	100
Yukon	15,000	15,000	100
Northwest Territories	25,000	25,000	100
CANADA	18,519,033	18,780,000	98.6

TABLE B

NET POPULATION CERTIFIED BY THE DOMINION STATISTICIAN,
BY PROVINCE
AS USED FOR CALCULATION OF PER CAPITA COSTS AND FOR
MAKING ADVANCE PAYMENTS TO NON-PREMIUM PROVINCES

PROVINCE	June 1, 1962		June 1, 1963
	Based on Advance Estimate	Based on Original Published Intercensal Estimate	Based on Advance Estimate
Newfoundland	469,000	468,000	481,000
Prince Edward Island	105,000	105,000	105,000
Nova Scotia	723,000	724,000	733,000
New Brunswick	597,000	600,000	605,000
Quebec	5,333,000	5,346,000	5,465,000
Ontario	6,282,000	6,294,000	6,401,000
Manitoba	924,000	924,000	941,000
Saskatchewan	925,000	927,000	924,000
Alberta	1,359,000	1,358,000	1,398,000
British Columbia	1,641,000	1,645,000	1,687,000
Yukon	15,000	14,000	15,000
Northwest Territories	23,000	24,000	25,000
CANADA	18,396,000	18,429,000	18,780,000

The federal contribution as set out in the Act, is the aggregate in the year of twenty-five per cent of the per capita cost of in-patient services in Canada, that is the national per capita cost, and twenty-five per cent of the per capita cost of in-patient services in the province less the amount of authorized charges, multiplied by the average for the year of the number of insured persons in the province.

The effect of this formula is that the high-cost provinces receive a lower percentage of their costs from the federal government than do the low-cost provinces. The inclusion in the formula of the national per capita cost, however, acts as a deterrent to the high-cost provinces, since the more provincial costs exceed the national costs, the lower the percentage of the costs the federal contribution will be.

Since the federal contribution is calculated on an annual basis, provision was made in the Hospital Insurance Regulations for advances on account of contributions, so that the provinces would not be required to wait a full year for reimbursement of the amounts which they are required to pay to hospitals on a continuing basis. In order to expedite the payment of advances and, at the same time, to forestall the likelihood of major financial adjustments after the end of the year, the formula which is used for the calculation of the advance, provides for a small holdback of the amount due to the province. The formula for the advance, therefore, differs from the formula for the annual contribution in that twenty-three and one-half per cent of the per capita cost of in-patient services in Canada is paid (was twenty-two per cent prior to January 1, 1962 when it was altered in accordance with the amendment to the Hospital Insurance Regulations discussed in the last report) instead of twenty-five per cent provided for in the annual calculation, and the amount of the advance is calculated on the basis of provincial payments, which may or may not be shareable costs as defined in the law.

Since the amount of the federal payment is calculated on a formula which includes the per capita cost of hospital care in Canada, continuing studies are carried out to ensure that this figure maintains accuracy in an area where costs are subject to fluctuations. Changes in the national per capita cost are made, subject to the approval of Treasury Board, at varying intervals as the situation requires. The purpose of making periodic adjustments in the national per capita is to maintain realistic advance payments and to eliminate major adjustments in the calculations of the federal contribution.

The costs which are shareable by the federal government, are described in the federal legislation. The Act specifically excludes from shareable costs amounts expended on the capital cost of land, buildings or physical plant; on the payment of any capital debt or interest related

to capital debt; on the payment of debt incurred prior to the coming into force of the agreement or on the interest related to such prior debt; or any provision for depreciation on the value of land, buildings or physical plant. The term "physical plant" is defined in the Regulations as excluding furniture and movable equipment, or non-movable equipment specially required for use in a hospital. Thus, these items are shareable.

In this connection, it should be noted that most of the capital items which are, by definition, excluded from shareable costs, such as the costs of construction and other matters pertaining to physical plant, are supported by the federal government through the National Health Grants program and particularly through the Hospital Construction grant.

Generally speaking, shareable costs are the operating costs of the hospital which have been approved by the provincial authority and which have been determined in accordance with recognized and generally accepted accounting principles and procedures. The operating costs of a hospital as defined in the Regulations, however, specifically exclude a number of items which, although provided in or in connection with the hospital, are not considered to be an integral part of the operation of the hospital.

The province is required to review and approve the costs of each hospital and these approved costs form the basis of the federal sharing formula.

During the year under review, payments to the provinces consisted of the regular monthly advance payments on a current basis and the payment of the final contribution based on shareable costs for the calendar year 1960.

Since the final settlement of the federal contribution for 1960 was somewhat delayed for technical reasons and since the amount represented by the holdback described above in connection with advance payments was at the level which had been in force before the Hospital Insurance Regulations were amended, the Governor-in-Council authorized a special further advance on account of the contributions for the year 1960 to some of the provinces in August 1962. The final payment of the federal contribution for 1960 was completed in March 1963.

Table C is the summary of payments by Canada to participating provinces during the fiscal year under review. It includes advance payments on contributions as well as the final adjusted contribution to Alberta for 1959, which had been delayed for technical reasons, and the final adjusted contributions for 1960 to the provinces which were participating in that year.

TABLE C
SUMMARY OF PAYMENTS MADE BY CANADA TO PARTICIPATING PROVINCES,
BY PROVINCE, 1962-63 FISCAL YEAR

PROVINCE	Advance payments			Final Payments*	Total Payments
	In-Patient	Out-Patient	Total		
Newfoundland	\$ 6,504,809.92	\$ 357,591.01	\$ 6,862,400.93	\$ 610,062.35	\$ 7,472,463.28
Prince Edward Island	1,510,712.07	118,737.72	1,629,449.79	44,231.32	1,673,681.11
Nova Scotia	11,930,333.21	882,540.08	12,812,873.29	707,101.41	13,519,974.70
New Brunswick	10,588,871.42	220,365.31	10,809,236.73	85,475.14	10,894,711.87
Quebec	88,549,556.56	164,078.85	88,713,635.41	—	88,713,635.41
Ontario	114,186,450.71	2,045,384.09	116,231,834.80	5,871,547.81	122,103,382.61
Manitoba	16,504,850.75	213,788.56	16,718,639.31	630,294.77	17,348,934.08
Saskatchewan	17,137,459.36	334,891.51	17,472,350.87	806,107.63	18,278,458.50
Alberta	22,979,223.32	—	22,979,223.32	2,805,749.98	25,784,973.30
British Columbia	28,694,997.70	—	28,694,997.70	1,354,149.73	30,049,147.43
Yukon	295,691.38	2,467.14	298,158.52	12,108.84	310,267.36
Northwest Territories	487,707.57	7,516.58	495,224.15	27,923.87	523,148.02
TOTALS	\$319,370,663.97	\$4,347,360.85	\$323,718,024.82	\$12,954,752.85	\$336,672,777.67

* Final payments for the 1960 calendar year for all participating provinces, and final payment of \$983,006.23 to Alberta with respect to 1959.

The total payments to the provinces for the year under review \$323, 718, 024.82 as advance payments and \$12, 954, 752.85 as final adjusted payments making a total of \$336, 672, 777.67.

Table D shows the total payments by fiscal year, to participating provinces since the inception of the hospital insurance program on July 1, 1958. It will be noted that this figure exceeds one billion dollars. It should be recalled that in 1958-59, only five provinces (Newfoundland, Manitoba, Saskatchewan, Alberta and British Columbia) participated at the beginning of the program, while two additional provinces (Nova Scotia and Ontario) operated programs for three months only. These seven provinces were joined during the fiscal year 1959-60, by two other provinces which operated programs for only part of that fiscal year (New Brunswick from July 1 and Prince Edward Island from October 1). During the fiscal year 1960-61 the remaining provinces commenced to participate in the program (Northwest Territories, April 1, 1960; Yukon, July 1, 1960; and Quebec, January 1, 1961). The fiscal year 1961-62 was the first year during which all of the provinces were participating for the full fiscal year.

Factors which must be considered in connection with the payments shown in this Table are the increase in the number of hospital beds which are being made available to meet the needs of an increasing population; and increasing hospital costs due to readjustments in salaries and wages which form a substantial percentage of overall hospital expenditures.

Table E shows the total contributions by province, by calendar year instead of by fiscal year as was shown in Table D. As explained earlier, hospital insurance contributions are calculated on the basis of the calendar year. It will be noted that the amounts shown for 1958, 1959 and 1960 represent both advance payments and final adjusted payments. The amounts shown for 1961 and 1962 represent advance payments only and the amounts shown for 1963 represent advance payments for the first three months of that calendar year ending March 31, 1963.

Final Contribution for 1960

The final contributions payable for 1960 were calculated on the basis of the formula set out in the Hospital Insurance and Diagnostic Services Act and described above. Since the province of Quebec did not participate during 1960, the per capita cost of in-patient services in this province was estimated from hospital financial returns and supplementary information from other sources.

TABLE D
PAYMENTS BY CANADA - FISCAL YEAR 1958-59, 1959-60, 1960-61, 1961-62, 1962-63,
AND TOTAL PAYMENTS JULY 1, 1958 - MARCH 31, 1963

PROVINCE	1958-59	1959-60	1960-61	1961-62	1962-63	Total Payments From July 1, 1958 to March 31, 1963
Newfoundland	\$ 2,857,886.84	\$ 4,707,692.94	\$ 5,094,934.21	\$ 6,258,287.26	\$ 7,472,463.28	\$ 26,391,264.53
Prince Edward Island	-	447,338.27	1,010,806.54	1,381,894.39	1,673,681.11	4,513,720.31
Nova Scotia	1,572,782.64	8,162,540.78	9,595,387.52	11,872,932.01	13,519,974.70	44,723,617.65
New Brunswick	-	4,575,374.90	7,914,412.71	9,546,774.26	10,894,711.87	32,931,273.74
Quebec	-	-	13,936,740.72	73,022,517.78	88,713,635.41	175,672,893.91
Ontario	13,140,213.12	71,892,833.66	84,484,271.86	104,498,880.55	122,103,382.61	396,119,581.80
Manitoba	7,148,534.97	11,324,466.35	13,048,916.19	15,245,924.23	17,348,934.08	64,116,775.82
Saskatchewan	8,430,441.93	13,378,379.43	14,453,463.99	15,953,810.19	18,278,458.50	70,494,554.04
Alberta	8,774,575.68	15,698,727.86	16,905,597.57	19,730,547.07	25,784,973.30	86,894,421.48
British Columbia	12,784,038.88	20,406,091.56	22,493,438.52	25,697,550.94	30,049,147.43	111,430,267.33
Yukon	-	-	168,683.75	296,036.35	310,267.36	774,987.46
Northwest Territories	-	-	261,849.89	377,941.52	523,148.02	1,162,939.43
TOTAL	\$54,708,474.06	\$150,593,445.75	\$189,368,503.47	\$283,883,096.55	\$336,672,777.67	\$1,015,226,297.50

TABLE E

CONTRIBUTIONS BY CANADA - WITH RESPECT TO JULY 1, 1958 TO MARCH 31, 1963
BY PROVINCE AND BY CALENDAR YEAR

PROVINCE	1958 Total Contributions	1959 Total Contributions	1960 Total Contributions	1961 Advances on Contributions	1962 Advances on Contributions	1963 Advances on Contributions
Newfoundland	\$ 1,990,135.23	\$ 4,788,013.82	\$ 5,603,386.29	\$ 5,656,923.57	\$ 6,737,187.55	\$ 1,615,418.07
Prince Edward Island	-	235,524.49	1,116,640.33	1,203,258.07	1,550,148.17	408,149.25
Nova Scotia	-	8,149,539.76	9,991,458.82	10,595,263.12	12,750,964.59	3,236,391.36
New Brunswick	-	3,331,614.19	7,409,672.94	9,086,618.46	10,395,505.09	2,707,863.06
Quebec	-	-	-	66,746,709.45	85,325,597.04	23,600,587.42
Ontario	-	72,610,303.71	86,732,452.12	95,016,981.49	112,514,191.97	29,245,652.51
Manitoba	4,779,865.66	11,556,009.75	13,229,363.97	14,086,400.97	16,263,890.65	4,201,244.82
Saskatchewan	5,775,875.67	13,276,380.46	14,893,775.21	15,119,648.10	17,053,916.82	4,374,957.78
Alberta	6,494,722.50	15,345,668.80	18,200,793.60	18,778,935.83	22,544,792.40	5,529,508.35
British Columbia	8,609,463.00	20,033,811.20	23,309,699.60	24,271,046.40	27,848,727.58	7,357,524.55
Yukon	-	-	124,314.31	269,520.51	315,257.35	65,805.29
Northwest Territories	-	-	208,049.96	362,037.05	463,972.44	128,870.98
TOTAL	\$27,650,062.06	\$149,326,866.18	\$180,819,807.15	\$261,193,343.02	\$313,764,146.65	\$ 82,472,072.44
CUMULATIVE TOTAL						\$1,015,226,297.50

The per capita cost of in-patient services in 1960 is shown in Table F. It will be noted that the national per capita cost was \$28.31 and that in six provinces the cost exceeded this national figure. As a result, in these provinces the federal contribution represented a percentage of less than 50%, whereas the participating provinces in which the per capita cost was less than the national, received contributions exceeding 50% of their costs.

Table G shows the total contribution for in-patient services in 1960 as calculated in the formula described above. The total contribution of nearly 180 million dollars was payable to the eleven provinces which were participating by the end of that calendar year. It will be recalled that only nine provinces participated during the whole year, while the Northwest Territories initiated its program only on April 1, 1960 and the Yukon Territory on July 1, 1960.

Table H shows the amount of the federal contribution which was payable for out-patient services in 1960. In this connection, it should be recalled that the scope of out-patient services varies very considerably from province to province. It is this variation which accounts for the fact that the out-patient contribution to Nova Scotia equalled more than one half that payable to Ontario although the population of Ontario is many times greater than this ratio. The scope of services in Nova Scotia, however, is relatively broad, while the Ontario out-patient services were limited to emergencies within twenty-four hours of accident. It is to be noted that the federal contribution towards the cost of out-patient services in a province is in the same proportion as the federal contribution for in-patient services in that province.

Table J shows the total contribution payable by Canada to participating provinces with respect to 1960, totalling more than 180 million dollars. It will be recalled, however, that advances had been made to the provinces in an amount exceeding 168 million dollars so that the final payments for 1960 total less than 12 million dollars.

Table K sets out the details of the cost of in-patient services in 1960 in the nine provinces which participated for the whole year. It will be noted that the provincial costs shown on the last line of this table are the final in-patient costs reported in Table "F". This table shows the amounts included or deducted in computing the in-patient costs.

Line two of Table K reflects depreciation on buildings and physical plant and the interest on hospital debt. In the provinces of Newfoundland, New Brunswick, Alberta and British Columbia the depreciation on furniture and equipment is also included in this deduction as these provinces elected to finance furniture and equipment on an outright purchase basis. Payments

TABLE F

COST OF IN-PATIENT SERVICES, 1960; NET POPULATION JUNE 1, 1960
TOTAL AND 25% PER CAPITA COST, 1960, BY PROVINCE

PROVINCE	Cost of In-Patient Services 1960	Net Population At June 1, 1960	Per Capita Cost	
			Total	25%
			1960	
Newfoundland	\$ 8,417,909.69	457,000	\$18.4199	\$4.6050
Prince Edward Island	1,961,669.26	102,000	19.2321	4.8080
Nova Scotia	17,668,032.81	702,000	25.1681	6.2920
New Brunswick	16,269,527.62	593,000	27.4360	6.8590
Quebec	108,680,320.00	5,087,000	21.3643	5.3411
Ontario	192,471,252.07	6,046,000	31.8345	7.9586
Manitoba	27,649,032.00	888,000	31.1363	7.7841
Saskatchewan	33,904,161.33	907,000	37.3806	9.3452
Alberta	41,856,756.05	1,272,000	32.9063	8.2266
British Columbia	50,591,381.71	1,594,000	31.7386	7.9347
Yukon	623,352.55	13,000	47.9502	11.9876
Northwest Territories	555,255.80	21,000	26.4408	6.6102
CANADA	\$500,648,650.89	17,682,000	\$28.3140	\$7.0785

TABLE G
CONTRIBUTION BY CANADA WITH RESPECT TO IN-PATIENT SERVICES, 1960

PROVINCE	25% of National Per Capita	25% of Provincial Per Capita	Less 25% Per Capita Authorized Charges	AGGREGATE Per Capita Cost	AVERAGE Number of Insured Persons	IN-PATIENT CONTRIBUTION BY CANADA
Newfoundland	\$7.0785	\$ 4.6050	\$ -	\$11.6835	457,000	\$ 5,339,359.50
Prince Edward Island	7.0785	4.8080	-	11.8865	86,809	1,031,855.18
Nova Scotia	7.0785	6.2920	-	13,3705	702,000	9,386,091.00
New Brunswick	7.0785	6.8590	-	13,9375	522,255	7,278,929.06
Ontario	7.0785	7.9586	-	15.0371	5,698,582	85,690,147.39
Manitoba	7.0785	7.7841	-	14.8626	882,033	13,109,303.67
Saskatchewan	7.0785	9.3452	-	16.4237	888,419	14,591,127.13
Alberta	7.0785	8.2266	.9963	14.3088	1,272,000	18,200,793.60
British Columbia	7.0785	7.9347	.3898	14.6234	1,594,000	23,309,699.60
Yukon	7.0785	11.9876	-	19.0661	6,500	123,929.65
Northwest Territories	7.0785	6.6102	.5320	13.1567	15,750	207,218.03
TOTAL CONTRIBUTIONS BY CANADA FOR IN-PATIENT SERVICES, 1960						\$178,268,453.81

TABLE H

CONTRIBUTION BY CANADA WITH RESPECT TO OUT-PATIENT SERVICES, 1960

PROVINCE	In-Patient Contribution	In-Patient Cost Less Authorized Charges	Out-Patient Cost	Out-Patient Contribution
Newfoundland	\$ 5,339,359.50	\$ 8,417,909.69	\$ 416,573.79	\$ 264,226.79
Prince Edward Island	1,031,855.18	1,961,669.26	161,185.82	84,785.15
Nova Scotia	9,386,091.00	17,668,032.81	1,139,522.14	605,367.82
New Brunswick	7,278,929.06	16,269,527.62	292,232.72	130,743.88
Ontario	85,690,147.39	192,471,252.07	2,341,152.43	1,042,304.73
Manitoba	13,109,303.67	27,649,032.00	253,221.00	120,060.30
Saskatchewan	14,591,127.13	33,904,161.33	703,237.60	302,648.08
Yukon	123,929.65	623,352.55	1,934.82	384.66
Northwest Territories	207,218.03	521,741.30	2,094.67	831.93
			\$5,311,154.99	\$2,551,353.34

TABLE J

TOTAL CONTRIBUTIONS AND FINAL PAYMENTS BY CANADA, 1960

PROVINCE	Contributions By Canada, 1960			Less: Regular Advances	Final Payments*
	In-Patient	Out-Patient	Total		
Newfoundland	\$ 5,339,359.50	\$ 264,226.79	\$ 5,603,586.29	\$ 4,993,523.94	\$ 610,062.35
Prince Edward Island	1,031,855.18	84,785.15	1,116,640.33	1,072,409.01	44,231.32
Nova Scotia	9,386,091.00	605,367.82	9,991,458.82	9,284,357.41	707,101.41
New Brunswick	7,278,929.06	130,743.88	7,409,672.94	7,324,197.80	85,475.14
Ontario	85,690,147.39	1,042,304.73	86,732,452.12	80,860,904.31	5,871,547.81
Manitoba	13,109,303.67	120,060.30	13,229,363.97	12,599,069.20	630,294.77
Saskatchewan	14,591,127.13	302,648.08	14,893,775.21	14,087,667.58	806,107.63
Alberta	18,200,793.60	—	18,200,793.60	16,378,049.85	1,822,743.75
British Columbia	23,309,699.60	—	23,309,699.60	21,955,549.87	1,354,149.73
Yukon	123,929.65	384.66	124,314.31	112,205.47	12,108.84
Northwest Territories	207,218.03	831.93	208,049.96	180,126.09	27,923.87
TOTALS	\$178,268,453.81	\$2,551,353.34	\$180,819,807.15	\$168,848,060.53	\$11,971,746.62

* Including special advances.

TABLE K
COST OF IN-PATIENT SERVICES BY PROVINCE, 1960
FOR PROVINCES WHICH PARTICIPATED FOR THE COMPLETE YEAR

	Newfoundland	Prince Edward Island	Nova Scotia	New Brunswick	Ontario
1. Hospitals listed in Part I of Schedule "A":					
Operating Expenses	\$9,171,354.88	\$2,800,640.35	\$22,207,329.67	\$20,844,903.45	\$230,226,511.66
Less:					
Depreciation and interest	453,670.69	226,065.27	854,095.69	2,469,734.78	9,649,326.48
Direct costs of research, ambulance and O.P.D.	85,190.14	-	131,288.36	36,122.83	2,552,759.63
Unapproved expenses	30,902.24	59,604.41	406,933.92	56,023.53	1,476,163.08
Offset Income:					
Federal Government	78,790.40	54,514.65	83,883.60	67,217.80	734,800.67
Workmen's Compensation	174,369.82	19,546.30	308,775.90	407,208.37	4,277,587.77
Non-Residents	49,733.70	32,456.40	223,251.64	353,558.53	1,704,176.27
Care Deemed Unnecessary	8,995.00	34,594.15	49,522.00	4,802.20	126,047.04
Room Differential	127,208.36	65,134.50	605,812.59	460,708.60	6,775,067.42
Non-Benefit Drugs	-	-	836.37	99.10	4,945.56
Out-Patient Services	655,756.26	177,677.93	1,443,233.99	787,667.32	11,673,515.75
Recoveries and Sales	640,113.82	151,214.67	1,243,018.50	1,258,375.30	9,573,546.52
Other Income	151,000.12	132,557.95	140,788.54	44,511.84	2,097,269.56
Total Deductions	2,455,730.55	953,366.23	5,491,441.10	5,946,030.20	50,645,205.75
Net Operating Costs	6,715,624.33	1,847,274.12	16,715,888.57	14,898,873.25	179,581,305.91
2. Provincial Payments:					
Equipment	816,830.09	-	-	515,126.27	-
Contract Hospitals	683,781.10	5,952.79	62,105.11	30,375.28	6,399,124.69
Federal Hospitals	30,400.00	-	698,282.20	508,488.50	5,151,597.10
Out-of-Province Care	195,066.79	109,161.78	240,110.63	329,917.92	2,022,719.33
3. Authorized Charges:					
Contract Hospitals	-	-	-	-	-
Federal Hospitals	-	-	-	-	-
4. Sub-total	8,441,702.31	1,962,388.69	17,716,386.51	16,282,781.22	193,154,747.03
5. Amounts Recovered	23,792.62	719.43	48,353.70	13,253.60	683,494.96
	\$8,417,909.69	\$1,961,669.26	\$17,668,032.81	\$16,296,034.82	\$193,838,241.99

TABLE K - Cont'd

	Manitoba	Saskatchewan	Alberta	British Columbia
1. Hospitals listed in Part 1 of Schedule "A":				
Operating Expenses	\$32,263,094.00	\$41,850,692.61	\$48,155,734.94	\$58,941,484.35
Less:				
Depreciation and interest	1,371,278.00	1,787,341.69	3,741,463.26	3,210,677.54
Direct costs of research, ambulance and O.P.D.	595,189.00	2,176.07	340,633.91	291,013.02
Unapproved expenses	73,127.00	1,252,042.43	823,565.70	769,105.65
Offset Income:				
Federal Government	51,087.00	472,947.95	-	218,383.88
Workmen's Compensation	385,542.00	489,839.35	1,220,889.36	1,251,403.80
Non-Residents	894,103.00	496,365.29	626,144.99	359,280.29
Care Deemed Unnecessary	50,428.00	14,234.24	34,474.50	789,239.00
Room Differential	508,818.00	334,599.66	859,865.88	956,095.03
Non-Benefit Drugs	-	571,147.39	-	84,707.88
Out-Patient Services	696,468.00	1,685,088.75	1,408,800.30	2,254,190.13
Recoveries and Sales	1,621,466.00	1,410,374.31	1,803,830.46	2,248,495.01
Other Income	260,055.00	454,447.04	605,155.34	486,966.60
Total Deductions	6,507,561.00	8,970,604.17	11,464,823.66	12,919,557.83
Net Operating Costs	25,755,533.00	32,880,088.44	36,690,911.28	46,021,926.52
2. Provincial Payments:				
Equipment	-	47,248.97	1,949,806.87	1,113,665.70
Contract Hospitals	230,583.00	113,708.94	818,211.31	467,853.81
Federal Hospitals	1,340,531.00	255,526.80	1,569,357.00	2,585,845.00
Out-of-Province Care	391,563.00	651,520.13	406,635.76	412,114.10
3. Authorized Charges:				
Contract Hospitals	-	-	205,147.50	25,041.00
Federal Hospitals	-	-	296,758.50	140,184.00
4. Sub-total	27,718,210.00	33,948,093.28	41,936,828.22	50,766,630.13
5. Amounts Recovered	69,178.00	43,931.95	80,072.17	175,248.42
	\$27,649,032.00	\$33,904,161.33	\$41,856,756.05	\$50,991,381.71

for outright purchase of equipment in these provinces are shown in Section 2 of the table on the line entitled, "Equipment". In the province of Saskatchewan the provincially-owned hospitals are on an outright purchase basis for furniture and equipment and the remainder of the hospitals are on a depreciation basis.

The amounts shown for room differentials in the offset income section amount to 50% of the net earnings of the hospitals from charges for private and semi-private accommodation over and above standard ward rates. In some provinces the remaining 50% of this income is left with the hospitals, while in others, varying methods are applied.

The provincial payments to federally-owned hospitals are shown in Section 2 of Table K. These are payments for insured in-patient services rendered to insured persons in hospitals operated by the Departments of Veterans Affairs, National Defence and National Health and Welfare.

When insured services are furnished to a person in respect of an injury or disability, where such person is legally entitled to recover the cost of such services from some other person by way of damages, the hospital account is paid by the provincial authority, and action is then taken to recover the cost from the responsible third party. The amounts so recovered in respect of insured in-patient services are shown on the second last line of Table K.

HOSPITALIZATION EXPERIENCE, 1961

This part of the report contains a review of some of the main features of the hospital experience under the Hospital Insurance Program for the year 1961 and for prior years. It includes information on hospital utilization and bed facilities, selected data on patient characteristics, numerical counts of hospital personnel, and a summary of hospital expenditures. Overall trends in the participating provinces from 1959 to 1961 are shown mainly in the tables in the main body of the report, while a more detailed picture of provincial experience for the year 1961 is in the tables in the Appendix.

With the exception of a few tables on selected characteristics of inpatients (discussed on page) the statistical data in this report have been derived from the Annual Return of Hospitals. As explained in previous Reports to Parliament, the Annual Return of Hospitals was designed for a dual purpose: to fulfill the requirements of the Statistics Act which is administered by the Dominion Bureau of Statistics, and to implement provincial undertakings embodied in the Agreements under the Hospital Insurance and Diagnostic Services Act. The Return consists of two main parts, the first relating to facilities and services and the

second relating to finances. The first part is broken down into six main segments: classification of hospital; beds; utilization data; departmental services; personnel; and training facilities. The second part consists of details relating to the revenue fund; the plant fund; the endowment fund; and also requires certification by the provincial authority and the hospital auditor.

The statistical data compiled from the Annual Returns pertain to hospitals which are listed in the federal-provincial agreements under the Hospital Insurance and Diagnostic Services Act, and which are classified as "budget review", "contract" or "federal". Most hospitals are in the category of budget review hospitals, since public hospitals must be listed by the provinces on the basis of a budget review system. A "contract" hospital is defined in the Hospital Insurance Regulations as a private or industrial hospital with which a province has contracted for the provision of insured services. The category of hospital which is described as "federal" is defined as a hospital which is owned or operated by the Government of Canada.

UTILIZATION AND BED ACCOMMODATION

The following tables include a number which deal with the overall picture for all classes of facilities covered by the insurance program, and others which highlight some of the more detailed information in relation to budget review hospitals (sub-divided as general, allied special, acute or chronic-convalescent) contract and federal hospitals. Among the elements of patient movement reviewed in this section are days of care in hospital, admissions, separations from hospital and average length of stay; consideration is given also to types of hospital beds and the occupancy of these beds. The total population figures used for the development of rates and ratios in most tables relate to the 1961 Census of Canada and to the revised intercensal estimates for 1959 and 1960 prepared by the Dominion Bureau of Statistics. In instances where the insured population is used, the figures refer to the annual average number of insured persons under Provincial Plans approved for purposes of final payment of shareable costs in 1959 and 1960, and for advance payments in 1961.

Volume of Care

The aggregate volume of insured hospital in-patient care in listed facilities⁽¹⁾ increased markedly in 1961 over the previous year, largely

(1) Provincial Plan days of adults and children within province in hospitals listed in federal-provincial hospital insurance agreements, excluding out-of-province hospitalization of residents of province.

as a result of the participation of the province of Quebec in the program beginning on January 1, 1961. Table 1 records an increase from 21,882,869 insured patient days of adults and children in 1960 to 31,247,844 insured days in 1961, and the latter figure excludes a number of hospitals in Quebec that did not submit complete statistical reports. Expressed in relation to population, the reported insured volume of care per 1000 insured persons in participating provinces (which excludes out-of-province hospitalization of beneficiaries) was 1730 days in 1959, 1808 days in 1960, and 1761 days in 1961; if the province of Quebec is excluded from the 1961 calculation the figure would be 1848 days for nine provinces and two territories. Reference may be made to Table A1 for consideration of trends in the insured-volume-of-care rate in particular provinces, and to variations among them in the volume of care provided. As indicated in Table A1, Saskatchewan and Alberta each continued to provide the highest insured volume of care rate in 1961, about 2245 days per 1000 population, the substantial increase in Alberta over the previous year being mainly the result of including listed nursing homes in the tabulations for the first time. Prince Edward Island, Ontario, Manitoba and the Yukon Territory were within the range of 1733 to 1887 days per 1000 population in 1961; it is notable that the degree of increase in Manitoba and Ontario over the previous year, was down considerably from the increase in 1960 over 1959. Among the remaining provinces with rates below 1700, there was relatively little change in Newfoundland and Nova Scotia from 1959 to 1961, a gradual increase in British Columbia arising partly from extension of program coverage to a number of rehabilitation-type hospital facilities, and a drop in New Brunswick from 1960 to 1961.⁽¹⁾

Table 1 shows also the relationship of insured patient days of beneficiaries hospitalized in the home province to all patient days supplied throughout Canada in reporting hospitals from 1959 to 1961. According to this table, insured days in seven provinces accounted for 60.5 percent of all patient days in 1959, insured days in nine provinces represented 64.3 percent of the total in 1960, and with all provinces and territories counted in 1961, insured days represented 87.8 percent of all patient days⁽²⁾. Reference to Table A2, however, which supplies detail by province on the 1961 distribution of all patient days by responsibility

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- (1) The drop in New Brunswick may be explained in part by a sizeable increase in the insured population following a changeover from premium financing in 1960 to general revenue financing in 1961.
- (2) The yearly figures exclude insured days in hospitals of provinces or territories that participated for only part of the calendar year i.e. New Brunswick, Prince Edward Island, Quebec, Yukon and Northwest Territories in 1959, and Quebec, Yukon and Northwest Territories in 1960.

TABLE 1

TOTAL PATIENT DAYS DURING YEAR(1), INSURED PATIENT DAYS DURING YEAR(2), INSURED PATIENT DAYS AS A PERCENT OF TOTAL PATIENT DAYS, AND RATES PER 1,000 TOTAL(3) AND INSURED(4) POPULATION, ADULTS AND CHILDREN, CANADA, 1959-1961

Item	1959		1960		1961	
	Number of Hospitals Reporting	Number or rate	Number of Hospitals Reporting	Number or rate	Number of Hospitals Reporting	Number or rate
Total patient days during year(1)	1,180	32,091,524	1,229	34,012,720	1,307(5)	35,599,317
Insured patient days during year(2)	851	19,415,109	950	21,882,869	1,258(6)	31,247,844
Insured patient days as a percent of total patient days	—	60.5	—	64.3	—	87.8
Total patient days during year per 1,000 total population	—	1,835.6	—	1,903.3	—	1,951.9
Insured patient days during year per 1,000 insured population	—	1,703.4	—	1,808.0	—	1,761.3

(1) Total patient days in reporting hospitals in all provinces and territories.

(2) Provincial Plan responsibility days for hospitals located in the respective provinces, excluding out-of-province insured hospital care. Limited to hospitals listed in Hospital Insurance Agreements throughout full calendar year.

(3) Based on Census of Canada and Revised Intercensal Population Estimates as at June 1, Dominion Bureau of Statistics.

(4) Based on annual average number of insured persons under Provincial Plans, Health Insurance, Department of National Health and Welfare.

(5) No reports received from 33 listed hospitals.

(6) 49 reporting hospitals did not report distribution of patient days by responsibility for payment.

for payment, provides a reminder that undistributed days⁽¹⁾ and days for non-residents of a province should also be taken into account. If consideration is given to the 1.7 percent of the days with no distribution reported and to the 1.3 percent for non-residents of a province, many of whom would be receiving insured out-of-province care, it may be concluded that perhaps 90 percent of the days in listed hospitals in 1961 represented insured patient days. With respect to the remaining 10 percent, it will be noted from Table A2 that 6.3 percent of all the patient days continued to be a federal responsibility; this category refers mainly to war veterans and includes a substantial element of domiciliary care which would not be accepted as hospital care by any Provincial Plan. After taking into account Workmen's Compensation Board care, and non-acceptable care for insured residents, the remaining category of uninsured care for uninsured residents represented slightly less than one percent of the overall total; the highest proportion of uninsured care for uninsured residents was in Prince Edward Island - 2.5 percent, and Ontario - 2.0 percent.

The volume of in-patient care is essentially a function of two factors: the number of admissions to hospital and the average length of stay in hospital. Table 2 contains figures on total days, admissions and separations of all in-patients in hospital listed in the hospital insurance agreements from 1959 to 1961. During 1961 the total days of care for adults and children was 35,599,317 or 1952 days per 1000 population; 2,876,549 admissions to hospital represented a rate of 157.7 admissions per 1000 population. The average length of stay (patient days during year divided by separations) was 12.2 days⁽²⁾. Total patient day, admission and separation rates per 1000 population by province in 1961 are shown in Table A3.

Bed Facilities

As shown in Table 3, the number of hospitals and other facilities listed in hospital insurance agreements increased from 944 at the end of 1959, to 1052 at the end of 1960, and to 1366 at the end of the year 1961. Excluding 26 non-bed facilities, there were 1340 listed hospitals at the end of 1961; reported beds and cribs totalled 121,046. Despite the large

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- (1) Undistributed days represent patient days where no distribution by responsibility for payment was reported by the hospital in its annual return.
 - (2) The figure of 12.2 days average stay for all listed hospitals should not be confused with the figure of 10.1 days average stay in budget review general hospitals shown in Table 8.

TABLE 2

TOTAL PATIENT DAYS DURING YEAR, ADMISSIONS, SEPARATIONS AND AVERAGE LENGTH OF STAY, ADULTS AND CHILDREN, IN REPORTING HOSPITALS LISTED IN HOSPITAL INSURANCE AGREEMENTS⁽¹⁾, AND RATES PER 1,000 POPULATION, CANADA 1959-1961.

Year	Reported Patient Days During Year	Reported Admissions During Year	Reported Separations During Year	Average Length of stay - Patient Days During Year Divided by Separations ⁽²⁾
Number				
1959 ⁽³⁾	22,288,332	1,903,327	1,900,214	11.7
1960 ⁽⁴⁾	25,135,920	2,088,073	2,092,743	12.0
1961 ⁽⁵⁾	35,599,317	2,876,549	2,871,986	12.2
Rate Per 1,000 Population ⁽⁶⁾				
1959 ⁽³⁾	1,898.2	162.1	161.8	
1960 ⁽⁴⁾	1,980.5	164.5	164.9	
1961 ⁽⁵⁾	1,951.9	157.7	157.5	

(1) Limited to hospitals listed throughout the full calendar year.

(2) Calculated for hospitals supplying data on patient days and separations.

(3) Listed hospitals in seven provinces.

(4) Listed hospitals in nine provinces.

(5) Listed hospitals in ten provinces and two territories.

(6) Based on Census of Canada, and Revised Intercensal Population Estimates as at June 1, Dominion Bureau of Statistics.

TABLE 3

NUMBER OF HOSPITALS AND OTHER FACILITIES LISTED IN HOSPITAL INSURANCE AGREEMENTS, BEDS AND CRIBS SET UP ON DECEMBER 31, AND RATE PER 1,000 POPULATION IN PARTICIPATING PROVINCES, CANADA, 1959-1961.

Year	Number of Hospitals and Other Facilities Listed in Provincial Agreements	Number of Hospitals Reporting	Beds and Cribs Set Up on December 31	
			Number	Rate per 1,000 Population
1959	944 ⁽¹⁾	920	81,270	6.5
1960	1,052 ⁽²⁾	1,024	86,178	6.8
1961	1,366 ⁽³⁾	1,311 ⁽⁴⁾	121,046	6.6

(1) Listed hospitals and facilities in Hospital Insurance Agreements of nine provinces.

(2) Listed hospitals and facilities in Hospital Insurance Agreements of nine provinces and two territories.

(3) Listed hospitals and facilities in Hospital Insurance Agreements of ten provinces and two territories. Includes 26 "other facilities".

(4) Includes three instances of single combined report for two listed hospitals.

increase in total beds brought about by the entry of Quebec into the program in 1961, the overall ratio of beds to population was reduced slightly from the previous year because Quebec was somewhat below the national average in this respect. The change in bed facilities from 1959 to 1961 shown in Table 3, was the result of the entry of provinces into the program, the listing of additional existing facilities and the construction of new hospitals and extensions of existing hospitals. Beds and cribs set up in each province from 1959 to 1961 are shown in Table A4.

The relationship of hospital bed facilities, hospital admissions and the volume of care in each province in 1961 is shown in Table 4, and points up the continuing wide variation among provinces with respect to overall hospital utilization rates and bed-population ratios. The sparsely populated Yukon and Northwest Territories had, as might be expected, by far the highest overall bed-population ratios, while the Yukon also had a high utilization rate, partly because of care provided to transients. Alberta and Saskatchewan had more than eight beds per 1,000 population, provided more than 2,000 days per 1,000 population and had above average admission rates. Ontario and British Columbia had bed-population ratios close to the national average and, along with Manitoba, supplied in the region of 2,000 days of care per 1,000 population. Quebec and the Atlantic Provinces were somewhat below the national average with respect to bed-population ratios and with respect to patient days of care per 1000 population. New Brunswick had an admission rate considerably above the national average.

The facilities listed in the hospital insurance agreements are classified by payment status as budget review, contract or federal hospitals, and Table 5 shows their distribution in numbers, beds and patient days by these categories. The budget review category represented slightly less than 70 per cent of all the facilities, but accounted for about 85 per cent of the beds and patient days in 1961; included were practically all public hospitals across the country. The contract type of arrangement pertained mainly to a number of small industrial and private hospitals, but also covered a considerable number of nursing home type facilities included in the program on a year to year basis in Quebec, Ontario and Alberta; about 25 per cent of the facilities were on a contract arrangement. Listed also were 79 federal government facilities, including veterans hospitals, Indian hospitals, and many small nursing stations operated by Indian and Northern Health Services.

The provincial distribution of listed facilities by payment status in 1961 is shown for the number of facilities in Table A5, for beds set up in Table A6, and for patient days in Table A7. From these tables it may be noted that Quebec, Ontario and Alberta each had a substantial proportion of contract facilities, amounting to 42 percent, 34 percent and 26 percent

TABLE 4

TOTAL PATIENT DAYS DURING YEAR, ADMISSIONS DURING YEAR, AND BEDS SET UP ON DECEMBER 31, PER 1,000 POPULATION, ADULTS AND CHILDREN, IN HOSPITALS LISTED IN HOSPITAL INSURANCE AGREEMENTS, BY PROVINCE, 1961.

PROVINCE	Rate Per 1,000 Population		
	Patient Days During Year	Admissions During Year	Beds and Cribs Set Up on December 31
Newfoundland	1275.0	111.2	4.3
Prince Edward Island	1604.6	155.1	6.2
Nova Scotia	1600.4	148.3	5.6
New Brunswick	1878.3	174.5	6.2
Quebec	1795.2	138.0	6.1
Ontario	2017.7	152.3	6.6
Manitoba	2015.5	179.6	7.3
Saskatchewan	2301.6	215.6	8.2
Alberta	2414.6	196.4	8.5
British Columbia	1992.5	175.4	6.6
Yukon	2050.4	238.6	10.7
Northwest Territories	1826.2	198.0	14.2
CANADA	1951.9	157.7	6.6

TABLE 5

NUMBER AND PERCENTAGE DISTRIBUTION OF HOSPITALS AND OTHER FACILITIES LISTED, BEDS AND CRIBS SET UP, ON DECEMBER 31, AND PATIENT DAYS DURING YEAR, ADULTS AND CHILDREN, IN HOSPITALS LISTED IN HOSPITAL INSURANCE AGREEMENTS, BY STATUS OF HOSPITAL, CANADA, 1961.

Item	Budget Review	Contract	Federal Government	Total
NUMBER				
Hospitals and Other Facilities Listed	947	340	79	1,366
Beds and Cribs Set Up	103,083	7,602	10,361	121,046
Patient Days During Year	30,468,360	2,179,478	2,951,479	35,599,317
Hospitals Reporting	936	306	65	1,307
PERCENT				
Hospitals and Other Facilities Listed	69.3	24.9	5.8	100.0
Beds and Cribs Set Up	85.2	6.3	8.6	100.0
Patient Days During Year	85.6	6.1	8.3	100.0

respectively, of all listed facilities in the province. But with respect to beds and days of care, the highest provincial percentage was in Alberta where contract facilities accounted for 10.8 percent of the beds and 12 percent of the days. In the case of the Yukon and Northwest Territories most of the listed facilities were either contract or federal hospitals.

Budget Review Hospitals

Budget review hospitals included about seven-eighths of the beds and supplied seven-eighths of the volume of care in listed hospitals in 1961.

Table 6 presents a picture of the number and percentage distribution of the main types of beds and cribs for adults and children in budget review hospitals in 1961. It will be noted from this table that 87.5 percent of the beds set up were for the treatment of acute illness, while 12.5 per cent of the beds were set up for chronic-convalescent or long-term patients. In other words, there were seven acute beds for each chronic-convalescent bed set up. The number of beds allocated specifically to medicine and surgery (56,171) comprised 54.5 percent of all the beds set up. Paediatric beds (13,484), accounting for 13.1 per cent were the next most numerous category. Obstetrical beds (12,939), were roughly equal in number to the total number of chronic-convalescent beds set up. 6,121 miscellaneous beds such as isolation and orthopedic made up a category accounting for 5.9 percent of the total. Psychiatric beds totalling 1,514 represented about 1.5 percent of the total number of beds in budget review hospitals covered by the Hospital Insurance Program.

Hospital beds may be classified also in terms of their pay status as standard, semi-private or private accommodation. Budget review hospitals are permitted to charge differential rates to individuals who choose semi-private or private hospital accommodation; individuals who select standard ward care, however, may not be charged differential rates by the hospital. Table 7 and Table A8 contain information on the utilization of standard ward accommodation, and preferred accommodation (semi-private and private beds) in budget review hospitals. Approximately 63 percent of hospital beds represented standard ward accommodation at the end of 1961, although about 68 percent of the days of care during the year were classified as standard. Conversely, 37 percent of the beds were designated as preferred accommodation, although only 32 percent of the days involved differential charges. It is interesting to note from Table A8 that none of the four western provinces had more than 20 percent of its patient days classified as preferred accommodation days. By contrast, the three Maritime Provinces all had more than 20 percent of their days in preferred accommodation, while Ontario and Quebec had about 40 percent of their hospital care in this category; these, of course, were all provinces which had voluntary hospital insurance plans developing for a number of years before the introduction of the government hospital insurance scheme.

TABLE 6

BUDGET REVIEW HOSPITALS: NUMBER AND PERCENTAGE DISTRIBUTION OF BEDS AND CRIBS SET UP BY TYPE OF UNIT, CANADA, DECEMBER 31, 1961

Type of Unit	Beds and Cribs Set Up on December 31			
	Budget Review General Hospitals	Other Budget Review Hospitals	Total Budget Review Hospitals	Percent of Total Beds and Cribs Set Up
Acute Treatment				
Medicine-Surgery	55,996	175	56,171	54.5
Obstetric	12,524	415	12,939	12.5
Paediatric	13,260	224	13,484	13.1
Psychiatric	1,514	—	1,514	1.5
Other ⁽¹⁾	5,474	647	6,121	5.9
Total	88,768	1,461	90,229	87.5
Chronic-Convalescent				
Long-term	191	4,713	4,904	4.8
Tuberculosis	37	—	37	*
Other	2,123	5,790	7,913	7.7
Total	2,351	10,503	12,854	12.5
Combined Total	91,119	11,964	103,083	100.0
Number of Hospitals Reporting	845	92	937	

* Less than 0.05

(1) Includes isolation, orthopaedic and other beds not specified as chronic, convalescent, geriatric or rehabilitation.

(2) Includes beds specified as chronic, convalescent, geriatric or rehabilitation.

The overall average percentage occupancy of beds and cribs set up in budget review hospitals was 81 percent in 1961 as shown in Table 7, but there was a wide variation for different categories of beds and hospitals. The indicated overall occupancy of standard ward beds was 87.6 percent, as compared with an average occupancy of 69.8 percent in preferred accommodation. The variation of occupancy between general and chronic hospitals also was large. Budget review general hospitals experienced an average occupancy of 80.3 percent as shown in Table 8, while budget review chronic and convalescent hospitals had an average occupancy of 90.6 percent, shown in Table 9. With respect to size of hospital, Table 8 demonstrates a clear relationship between average percentage occupancy and hospital size in budget review general hospitals; in 1961 there was a range from 52.8 occupancy in the 1-9 bed size group to 87.3 percent in the 1000 bed and over size group. Table A9 confirms that the relationship between low occupancy and small hospital size was similar in most provinces. Variations among provinces in the overall average occupancy levels have been determined partly by the relative extent to which hospital care is provided through small or large hospitals in each province.

Table 8 shows a consistent pattern of increase in the length of stay moving from the smaller to larger hospitals in the budget review category, the more limited range of care and services in the smaller hospitals being one of the factors. Table A10 shows the average length of stay by size of hospital in each province. Table 8 shows an average length of stay of separations of 10.0 days in budget review general hospitals, while Table 9 records an average stay of 171 days in chronic and convalescent facilities.

Contract and Federal Hospitals

Contract hospitals, comprising mainly small private hospitals and nursing homes, accounted for only about 6 percent of the beds and days of care in 1961 under the hospital insurance program. As shown in Table 10 they included a substantial element of chronic-convalescent beds. In fact, for contract hospitals 53 percent of the beds were reported as chronic-convalescent, while only 39 percent belonged in the acute treatment category. Despite the preponderance of chronic-convalescent beds in the contract hospital group, the average length of stay of separation is shown as only 15 days and the percentage occupancy as 76 percent.

With respect to federal government hospitals, 69 percent of the beds were in the acute treatment category and 31 percent were chronic-convalescent. The average percentage occupancy was 75 percent. Nevertheless, the federal hospital group had an average length of stay of 38 days. The distribution of beds, average stay and percentage occupancy by province for both contract and federal hospitals is shown in Tables A12 and A13.

TABLE 7

BUDGET REVIEW HOSPITALS: NUMBER AND PERCENTAGE DISTRIBUTION OF PATIENT DAYS DURING YEAR, BEDS AND CRIBS SET UP ON DECEMBER 31, AND PERCENTAGE OCCUPANCY, BY TYPE OF ACCOMMODATION, ADULTS AND CHILDREN, CANADA, 1961.

Type of Accommodation	Number of Hospitals Reporting	Patient Days During Year	Beds and Cribs Set up on December 31	Percentage Occupancy ⁽¹⁾
NUMBER				
Standard Ward	933	20,605,402	64,430	87.6
Preferred Accommodation	718	9,648,934	37,885	69.8
Total	934	30,254,336	102,315	81.0
PERCENT				
Standard Ward	99.9	68.1	63.0	—
Preferred Accommodation	76.8	31.9	37.0	—
Total	100.0	100.0	100.0	—

(1) Patient days as a percentage of 365 times beds set up on December 31.

TABLE 8

BUDGET REVIEW GENERAL HOSPITALS: NUMBER OF BEDS AND CRIBS SET UP ON DECEMBER 31, AVERAGE LENGTH OF STAY, AND PERCENTAGE OCCUPANCY⁽¹⁾, BY BED-SIZE OF HOSPITAL, CANADA, 1961.

Bed-Size of Hospital (Rated Bed Capacity)	Number of Hospitals Reporting	Beds and Cribs Set Up on December 31	Average Length of Stay		Percentage Occupancy ⁽¹⁾
			Patient-Days During Year Divided by Separations	Patient-Days of Separations Divided by Separations	
1 - 9	56	602	6.9	6.9	52.8
10 - 24	217	4,155	7.2	7.2	61.8
25 - 49	196	7,997	7.8	7.7	70.0
50 - 99	134	9,957	8.7	8.8	74.7
100 - 199	124	17,800	9.0	8.9	80.3
200 - 299	45	10,609	10.3	10.0	79.1
300 - 499	40	15,248	11.1	11.0	84.6
500 - 999	27	17,690	12.1	12.1	87.5
1,000 and over	6	7,061	14.5	14.4	97.3
TOTAL	845	91,119	10.1	10.0	80.3

(1) Patient days as a percentage of 365 times beds set up on December 31.

TABLE 9

BUDGET REVIEW CHRONIC AND CONVALESCENT HOSPITALS: NUMBER OF BEDS AND CRIBS SET UP ON DECEMBER 31, AVERAGE LENGTH OF STAY, AND PERCENTAGE OCCUPANCY⁽¹⁾, BY BED-SIZE OF HOSPITAL, CANADA, 1961.

Bed-Size of Hospital (Rated Bed Capacity)	Number of Hospitals Reporting	Beds and Cribs Set Up on December 31	Average Length of Stay		Percentage Occupancy ⁽¹⁾
			Patient-Days During Year Divided By Separations	Patient-Days of Separations Divided By Separations	
1 - 9	—	—	—	—	—
10 - 24	—	—	—	—	—
25 - 49	6	207	191.3	163.1	98.2
50 - 99	18	1,292	151.9	102.5	88.9
100 - 199	18	2,730	245.0	169.8	80.3
200 - 299	9	1,829	166.6	121.4	96.9
300 - 499	4	1,371	476.6	273.9	97.2
500 - 999	4	1,975	186.9	252.5	94.8
1,000 and over	—	—	—	—	—
TOTAL	59	9,404	207.8	171.3	90.6

(1) Patient-days as a percentage of 365 times beds set up on December 31.

TABLE 10

CONTRACT AND FEDERAL HOSPITALS: NUMBER AND PERCENTAGE DISTRIBUTION OF BEDS AND CRIBS SET UP ON DECEMBER 31 BY TYPE OF UNIT, AVERAGE LENGTH OF STAY, AND PERCENTAGE OCCUPANCY, CANADA, 1961

Type of Unit	Contract Hospitals		Federal Government Hospitals	
	Number	Percent(1)	Number	Percent
Acute Treatment				
Medicine-Surgery	1,609	25.2	4,688	46.2
Obstetric	465	7.3	143	1.4
Paediatric	270	4.2	352	3.5
Psychiatric	35	0.5	1,509	14.8
Other	134	2.1	303	3.0
Total	2,513	39.3	6,995	68.9
Chronic-Convalescent				
Long-term	1,381	21.6	1,067	10.5
Tuberculosis	12	0.2	476	4.7
Other	1,977	30.9	1,614	15.9
Total	3,370	52.7	3,157	31.1
Combined Total	6,392 ⁽²⁾	100.0 ⁽²⁾	10,152	100.0
Average Length of Stay ⁽³⁾	18.1	—	38.2	—
Average Length of Stay ⁽⁴⁾	15.1	—	35.7	—
Percentage Occupancy	76.2	—	75.4	—

(1) Percentages do not add to 100 percent because some beds were not distributed by type of unit.

(2) Includes 509 beds not specified as to type of unit which number accounts for 8.0 percent of total.

(3) Patient days during year divided by separations during year.

(4) Patient days of separations (since admission) divided by separations.

SELECTED DATA ON PATIENT CHARACTERISTICS

Included for the first time in this Annual Report are a number of tables containing selected data on hospitalization rates for 1961 shown by age, sex, place of residence and diagnostic categories. These data have been derived from information recorded by each hospital on admission-separation forms for each patient admitted to and separated from the hospital during the calendar year. The admission and separation forms are forwarded by the hospital to the provincial hospital insurance authority and furnish the Province with information on the details of inpatient care provided. Arrangements now exist in the various provinces for the processing and tabulation of the data relating to hospitalization experience, which are derived from these forms.

In recognition of the value of developing national statistics on patient characteristics based on uniform definitions in the provinces, the Sub-Committee on Quality of Care, Research and Statistics established a Working Party on Admission and Separation Forms in 1960. Following a number of meetings the Working Party submitted a report containing detailed recommendations for standardized definitions and procedures, and for the preparation of ten basic tables in each province. Subsequently, most of the provinces prepared some or all of the recommended tables for data collected for the calendar year 1961, and forwarded the tabulations to the Department of National Health and Welfare. Although there are some variations among provinces in the extent of statistical coverage, nevertheless it has been possible to produce combined figures which include data from most or at least a number of provinces. A few of the more interesting features of these extensive tabulations have been selected for inclusion in this report.

Age and Sex Incidence

Table 11 shows the combined hospitalization rates by age and sex for separated cases in eight provinces and two territories in 1961, while Table A14 gives the same data for each individual province and territory. For the two provinces of Nova Scotia and New Brunswick, and the Northwest Territories, the data relate to all Provincial Plan in-patients separated during the year, including residents hospitalized in other provinces. Four other provinces also limited the data to Provincial Plan in-patients but there are minor degrees of incompleteness: Newfoundland lacked information on newborns, Ontario based the data on "claims processed" during the year, Saskatchewan excluded Provincial Plan patients hospitalized in geriatric centres (chronic hospitals), and British Columbia excluded out-of-province hospitalization. The provinces of Quebec and Prince Edward Island and the Yukon Territory have included both insured and non-insured patients hospitalized within the province or territory, in specified facilities, whether or not they were covered by

HOSPITALIZATION BY AGE AND SEX FOR IN-PATIENTS⁽¹⁾ INSURED BY PROVINCIAL PLANS⁽²⁾ IN EIGHT PROVINCES AND TWO TERRITORIES⁽³⁾, 1961.

	0-4	5-14	15-24	25-44	45-64	65-69	70+	Age Unknown	Total Adults and Children
Separations									
Male	171,214	150,061	78,522	157,614	185,317	43,700	105,874	879	893,181
Female	119,368	129,978	287,406	551,653	200,255	40,439	99,650	1,068	1,429,817
Total	290,582	280,039	365,928	709,267	385,572	84,139	205,524	1,947	2,322,998
Separations Per 1,000 Population									
Male	170.1	85.0	68.0	73.6	131.4	209.8	284.1		110.8
Female	124.1	77.0	251.5	259.5	146.1	184.7	240.1		180.5
Total	147.6	81.1	159.2	166.2	138.6	197.0	261.0		145.3
Patient Days Since Admission									
Male	1,390,014	926,947	662,672	1,625,779	2,839,991	850,012	2,693,675	9,034	10,998,124
Female	1,001,344	765,484	1,822,948	4,245,978	2,981,432	815,164	3,244,884	12,073	14,889,307
Total	2,391,358	1,692,431	2,485,620	5,871,757	5,821,423	1,665,176	5,938,559	21,107	25,887,431
Days Since Admission Per 1,000 Population									
Male	1380.6	525.1	573.5	759.1	2013.0	4080.6	7229.3		1364.4
Female	1040.7	453.4	1595.2	1997.1	2175.4	3723.9	7819.5		1879.1
Total	1214.5	490.1	1081.5	1375.9	2093.0	3897.8	7540.3		1619.5

TABLE 11 *Cont'd.*

	0-4	5-14	15-24	25-44	45-64	65-69	70+	Age Unknown	Total Adults and Children
Average Stay of Separations									
Male	8.1	6.2	8.4	10.3	15.3	19.5	25.4	10.3	12.3
Female	8.4	5.9	6.3	7.7	14.9	20.2	32.6	11.3	10.4
Total	8.2	6.0	6.8	8.3	15.1	19.8	28.9	10.8	11.1
Population									
Male	1,006,786	1,765,346	1,155,474	2,141,645	1,410,846	208,306	372,604		8,061,007
Female	962,153	1,688,207	1,142,758	2,126,062	1,370,552	218,903	414,975		7,923,610
Total	1,968,939	3,453,553	2,298,232	4,267,707	2,781,398	427,209	787,579		15,984,617

(1) Excludes newborns.

(2) Except in Quebec, Prince Edward Island and the Yukon Territory which included both insured and non-insured patients hospitalized in the province or territory.

(3) Newfoundland, Prince Edward Island, Nova Scotia, New Brunswick, Quebec, Ontario, Saskatchewan, British Columbia, and Northwest Territories.

the Provincial Plan, but Quebec data are not complete. Hospitalization rates have been calculated in relation to 1961 Census population data by age groups and sex in all provinces and territories, despite the limitation of the utilization data to Provincial Plan beneficiaries in seven of the ten provinces. This has been done because most provinces do not have available any precise figures of the covered population by age and sex. However, in most instances any distortions introduced by this procedure should be minor, in view of the close to universal coverage that has been achieved by the Provincial Plans.

Tables 11 and A14 demonstrate clearly that women have higher overall hospitalization rates than men, although this does not apply uniformly to all age groups. The aggregate female separation rate of 180.5 per thousand population in 1961 was about 63 percent higher than the corresponding male rate of 110.8, while the female days of care rate of 1879 days per thousand population, was about 38 percent higher than the male rate of 1364 per thousand population. These differences between males and females were broadly similar in each of the eight provinces and the two territories, with the greatest overall differences observable in Newfoundland, Nova Scotia, New Brunswick and the North-west Territories.

Much of the difference in male and female hospitalization rates may be accounted for, of course, by women in the child-bearing age groups. Reference to Table 12 shows that the separation rates for females in the 15-24 and 25-44 age groups were higher than for any other female age group in the table⁽¹⁾, whereas the male separation rates for these age groups were lower than for any other male age group⁽²⁾. Thus, within these two age groups, males accounted for only from 20 to 25 percent of hospitalized cases, although their percentage share of combined days of care in the age groups was somewhat higher.

Despite the overall preponderance of females in utilization of hospitals, the male rates were higher among children in the 0-4 and 5-14 age groups. This pattern was common to seven provinces (excepting Prince Edward Island) and the two territories with respect both to separation and days of care rates. Moreover, beyond the age of 65 years, the male separation rates also were substantially higher than the female rates, although females had a higher days of care rate in the 70 plus age group.

(1) This pattern differed only in Prince Edward Island, Saskatchewan and Yukon Territory which had particularly high female separation rates in the 70 plus age group.

(2) Newfoundland, Prince Edward Island, Quebec and Yukon Territory had the lowest male separation rate in the 5-14 age group.

TABLE 12
HOSPITALIZATION BY RESIDENCE FOR IN-PATIENTS(1) INSURED BY
PROVINCIAL PLANS(2) IN FIVE PROVINCES(3)

Area of Residence	Population	Number of Separations	Separations Per 1,000 Population	Patient Days Since Admission	Days Since Admission per 1,000 Population	Average Stay of Separations
A. Incorporated cities, towns and villages						
1. 100,000 and over	496,663	70,729	142.4	829,991	1,671.1	11.7
2. 10,000-99,999	1,028,026	156,398	152.1	1,684,890	1,639.0	10.8
3. 1,000-9,999	431,818	86,865	201.2	795,006	1,841.1	9.2
4. Under 1,000	171,184	46,143	269.6	451,939	2,640.1	9.8
B. Unincorporated and rural areas	1,586,990	263,075	165.8	2,473,129	1,558.4	9.4
Total	3,714,681	623,611(4)	167.9	6,238,618(5)	1,679.4	10.0

(1) Excludes newborn.

(2) Except in Prince Edward Island which includes both insured and non-insured residents hospitalized in the province.

(3) Newfoundland, Prince Edward Island, New Brunswick, Saskatchewan and British Columbia.

(4) Includes 401 separations with residence not specified in Newfoundland.

(5) Includes 3,663 days of care with residence not specified in Newfoundland.

The main factor in the higher female days of care rate was the high female rate in Ontario; in most other provinces the male rate was higher for the 70 plus age group.

If the data are examined in successive age groups, it can be seen that the fairly high hospitalization rates of the 0-4 age group drop off sharply in the 5-14 group which has by far the lowest utilization rates of any age group. The volume of care rate then increases for each successive age group, although there is a dip in the separation rate from 45-64 as compared with the 25-44 group. The degree of variation between the highest and lowest utilization rates is large. Thus, the separation rate for the 70 plus age group is more than three times higher than the separation rate of the 5-14 age group, while the volume of care rate is more than fifteen times higher - 7540 compared to 490 days per thousand population.

The average length of stay of separations, too, follows a parallel pattern for the successive age groups, with a drop off in average stay in the 5-14 group as compared to the 0-4 age group, followed by a higher average stay for each succeeding group. The shortest average stay was 6.0 days in the 5-14 age group while the average stay of the 70 plus group was 28.9 days. The overall average stay for females in all age groups was 10.4 days, and the male average stay was 12.3, the difference arising mainly from the relatively short stay of women in the child-bearing age groups.

In comparing the provinces with respect to average length of stay, perhaps the most interesting data relate to the way in which the experience of Ontario varies from the other provinces. With respect to the age groups 0-4 and 5-14, the average stay in Ontario was substantially lower than that of any other province in Canada. With respect to the age groups 15-24 and 25-44, the average stay in Ontario was very close to the average for the other provinces. Beginning with the age groups 45-64 and 65-69 Ontario recorded the highest average stay of any province or territory. And with respect to the 70 plus age group, the average stay in Ontario of 41.4 days was more than 70 percent higher than the average stay figure of the next highest province (Quebec - 24) for the same age group.

The province of Ontario, with all participating chronic hospital and chronic unit separations included in the data, provided 10.5 days of hospital care of separations per person 70 years of age and over in the province as did also the Yukon Territory. Saskatchewan also had a high volume of care rate of 8.4 days per person in this age group, even though its geriatric centres (chronic hospitals) were not included in the statistical tabulations. Six other provinces and territories: Prince Edward Island, Nova Scotia, New Brunswick, Quebec, British Columbia and the Northwest Territories, had between five and six days of care per person; it should

be noted that Quebec data are incomplete because of the lack of data from some contract hospitals, while British Columbia strictly excludes from insurance coverage portions of chronic care not considered to be "active treatment". The province of Newfoundland provided only about 2.8 days per person in the 70 plus age group, about one-half the median and one-third the average, whereas for all age groups combined the Newfoundland volume of care rate was about three-quarters of the average for the eight provinces and two territories.

Hospital Care by Residence

Table 12 indicates the significance of place of residence as a factor in hospital utilization. In this table are shown combined hospitalization rates for 1961 in five provinces, distributed by place of residence of the patient, in the following five categories: incorporated cities, towns and villages⁽¹⁾ with population 100,000 and over, 10,000 to 99,999, 1,000 to 9,999, and under 1000 population, and unincorporated places and rural areas. Table A15 furnishes some of the details for the five individual provinces of Newfoundland, Prince Edward Island, New Brunswick, Saskatchewan and British Columbia, and also includes additional separate data submitted by the province of Ontario, which classified its municipalities in a different way.

As can be observed in Table 12, the residents of three cities over 100,000 population in Saskatchewan and British Columbia had a relatively low case rate, an average volume of care rate, and a higher average length of stay than other categories of residents. The residents of incorporated cities and towns from 10,000 to 99,999 population experienced a higher case rate, a similar volume of care rate, and a lower average length of stay than the large city dwellers. Moving down to incorporated municipalities from 1000 to 9999 population in size, the case rate was considerably higher, the volume of care rate higher, and the average length of stay much lower than for the 10,000 to 99,999 population category, and these clear-cut differences were similar in each of the five provinces. For the numerically small category of incorporated cities, towns and villages containing less than 1000 population each, both the case rate and volume of care rate were again much higher than for the preceding category except in New Brunswick and British Columbia.⁽²⁾

(1) British Columbia includes also district municipalities essentially of urban character.

(2) Both New Brunswick and British Columbia, however, had only a very few municipalities in the under 1000 population category.

It may be concluded that in the five provinces that submitted data, residents of the small villages and towns experienced higher utilization rates and a lower average length of stay than the residents of the larger urban areas. Other residents of unincorporated and rural areas, however, had a much lower hospital utilization rate than the residents of small towns and villages, although the average length of stay of the two groups was not greatly dissimilar. This pattern varied among the provinces so that for example, the utilization rate of residents of unincorporated and rural areas in Newfoundland was particularly low, while in British Columbia where some of these areas were not truly rural in character, the utilization rate was similar to that for the small towns and villages.

The observed differences in hospitalization rates for residents of the different categories of rural and urban population centres are probably caused by a variety of factors such as the age and sex distribution of the population, the availability of medical and hospital services, different customs and practices with regard to hospitalization, and the extent of health problems leading to variations in the distribution of specific diagnoses as between rural and urban areas.

Hospital Morbidity

Table 13 contains aggregate data on hospitalization by diagnostic categories in six provinces and two territories, which set out the average length of stay and percentage distribution of separated cases and of patient days of separated cases in the year 1961, distributed among 18 main diagnostic groupings and 98 specific diagnostic categories. These 98 diagnostic categories, designated as the Canadian List of Diagnoses for Hospital Statistics, were selected from the International Statistical Classification of Diseases, 1955 Revision, by the Working Party mentioned earlier, and were accepted as the basis for coding of diagnoses by most provinces. As with the other special tables submitted by the provinces, the degree of completeness varied, and there were minor elements of overlapping. Nova Scotia, Quebec⁽¹⁾, Saskatchewan and the two territories included Provincial Plan in-patients separated during the year, inclusive of residents hospitalized in other provinces, while British Columbia excluded out-of-province hospital care. Ontario⁽¹⁾ and Prince Edward Island covered all patients hospitalized within the province, whether or not covered by the Provincial Plan; Ontario included out-of-province hospitalization of beneficiaries; Prince Edward Island did not. Only the combined data for provinces submitting usable information are shown in this report.

(1) The morbidity data from Quebec and Ontario relates to a different group of patients than the age and sex data from these provinces.
(See footnotes to Table A14).

TABLE 13

HOSPITALIZATION BY DIAGNOSIS FOR ADULT AND CHILD IN-PATIENTS INSURED BY PROVINCIAL PLANS⁽¹⁾ IN SIX PROVINCES AND TWO TERRITORIES, 1961.

Diagnostic Category Canadian List	Separations	Patient-Days	Average Length of Stay (Days)
	Percentage Distri- bution (2)	Percentage Distri- bution (2)	
I INFECTIVE AND PARASITIC DISEASES	1.56	1.97	14.0
1. Tuberculosis, all forms	0.14	0.21	16.9
2. Poliomyelitis and encephalitis	0.12	0.33	31.5
3. Infectious hepatitis	0.30	0.37	13.5
4. Other diseases attributable to viruses	0.46	0.40	9.6
5. Other infective bacterial, spirochaetal, rickettsial or parasitic diseases	0.54	0.66	13.5
II NEOPLASMS	5.44	8.60	17.6
6. Malignant neoplasms of buccal cavity and pharynx	0.09	0.17	20.9
7. Malignant neoplasm of stomach	0.15	0.38	27.4
8. Malignant neoplasm of large intestine except rectum	0.21	0.61	31.8
9. Malignant neoplasm of rectum	0.12	0.37	34.1
10. Malignant neoplasm of bronchus, trachea and lung, primary, and unspecified as to whether primary or secondary	0.19	0.46	26.9
11. Malignant neoplasm of breast	0.30	0.66	24.8
12. Malignant neoplasm of cervix uteri	0.19	0.31	18.1
13. Malignant neoplasm of uterus other than cervix uteri	0.08	0.13	18.3
14. Malignant neoplasm of ovary, Fallopian tube and broad ligament	0.05	0.11	25.2
15. Malignant neoplasm of prostate	0.18	0.47	28.8
16. Malignant neoplasm of kidney, bladder and other urinary organs	0.21	0.41	21.8
17. Leukaemia and aleukaemia	0.12	0.23	21.4
18. Other malignant neoplasms and neoplasms of lym- phatic and haematopoietic tissue	0.85	2.04	26.8
19. Benign neoplasm of uterus	0.81	0.76	10.4
20. Benign neoplasm of ovary	0.36	0.35	10.9
21. Benign neoplasms (excluding uterus and ovary) and neoplasms of unspecified nature	1.53	1.14	8.3

TABLE 13 Cont'd.

Diagnostic Category Canadian List	Separations	Patient-Days	Average Length of Stay (Days)
	Percentage Distri- bution (2)	Percentage Distri- bution (2)	
III ALLERGIC, ENDOCRINE SYSTEM, METABOLIC AND NUTRITIONAL DISEASES	2.53	3.48	15.3
22. Asthma	0.60	0.59	10.9
23. Other allergic disorders (excluding asthma)	0.20	0.16	8.6
24. Diseases of Thyroid Gland	0.43	0.46	12.1
25. Diabetes mellitus	0.98	1.81	20.6
26. Diseases of other endocrine glands	0.10	0.15	15.8
27. Avitaminoses and other metabolic diseases	0.22	0.31	15.6
IV DISEASES OF THE BLOOD AND BLOOD-FORMING ORGANS	0.54	0.71	14.6
28. Diseases of the blood and blood-forming organs	0.54	0.71	14.6
V MENTAL, PSYCHONEUROTIC AND PERSONALITY DISORDERS	2.00	3.21	17.8
29. Psychoses	0.45	1.08	26.4
30. Psychoneurotic disorders	1.13	1.67	16.5
31. Disorders of character, behaviour and intelligence	0.42	0.46	12.2
VI DISEASES OF THE NERVOUS SYSTEM AND SENSE ORGANS	4.65	9.43	22.6
32. Vascular lesions affecting the central nervous system	1.12	4.39	43.6
33. Inflammatory and other diseases of the central nervous system	0.78	2.77	39.7
34. Diseases of nerves and peripheral ganglia	0.34	0.41	13.3
35. Diseases and conditions of the eye	1.31	1.04	8.8
36. Diseases of the ear and mastoid process	1.10	0.82	8.3
VII DISEASES OF THE CIRCULATORY SYSTEM	7.64	14.40	21.0
37. Rheumatic fever and chronic rheumatic heart disease	0.41	0.77	20.8
38. Arteriosclerotic and degenerative heart disease	3.12	6.85	24.4
39. Other diseases of the heart	0.73	1.27	19.4
40. Hypotensive heart disease and other hypertensive disease	0.76	1.44	21.1
41. Diseases of arteries	0.48	1.93	44.9
42. Varicose veins of lower extremities	0.64	0.73	12.8
43. Haemorrhoids	0.70	0.61	9.6
44. Phlebitis and thrombophlebitis	0.21	0.31	16.4
45. Other diseases of the circulatory system	0.59	0.49	9.2

TABLE 13 Cont'd.

Diagnostic Category Canadian List	Separations	Patient-Days	Average Length of Stay (Days)
	Percentage Distri- bution ⁽²⁾	Percentage Distri- bution ⁽²⁾	
VIII DISEASES OF THE RESPIRATORY SYSTEM	15.25	8.56	6.2
46. Acute upper respiratory infections	1.39	0.75	6.0
47. Influenza	0.52	0.31	6.5
48. Pneumonia	2.89	3.22	12.4
49. Bronchitis	1.60	1.45	10.1
50. Hypertrophy of tonsils and adenoids	7.27	1.36	2.1
51. Other diseases of respiratory system	1.58	1.47	10.4
IX DISEASES OF THE DIGESTIVE SYSTEM	13.36	12.45	10.4
52. Diseases of teeth and supporting structure	0.97	0.18	2.1
53. Ulcer of stomach, duodenum and jejunums	1.51	2.01	14.8
54. Gastritis, duodenitis and other disorders and diseases of the stomach and duodenum	0.81	0.63	8.6
55. Appendicitis	2.17	1.56	8.0
56. Hernia of Abdominal cavity	2.12	1.82	9.5
57. Intestinal obstruction without mention of hernia	0.34	0.38	12.6
58. Gastro-enteritis and colitis, except ulcerative, age 4 weeks and over	1.55	1.11	8.0
59. Chronic enteritis and ulcerative colitis	0.37	0.56	17.0
60. Cirrhosis and other diseases of the liver	0.28	0.47	18.5
61. Diseases of gallbladder and pancreas	2.07	2.67	14.3
62. Other diseases of digestive system	1.17	1.06	10.1
X DISEASES OF THE GENITO-URINARY SYSTEM	8.55	7.38	9.6
63. Nephritis and nephrosis	0.25	0.42	18.7
64. Infections of kidney	0.67	0.67	11.2
65. Calculi of kidney, ureter and other parts of the urinary system	0.59	0.53	9.9
66. Other diseases of urinary system	1.16	1.07	10.3
67. Hyperplasia of prostate	0.61	1.20	21.9
68. Redundant prepuce and phimosis	0.77	0.27	3.9
69. Diseases of ovary, Fallopian tube and parametrium, and infective disease of uterus, vagina and vulva	1.29	0.92	7.9
70. Uterovaginal prolapse	0.62	0.82	14.7
71. Disorders of menstruation	1.12	0.51	5.1
72. Other diseases of genital organs	1.47	0.97	7.3

TABLE 13 Cont'd.

Diagnostic Category Canadian List	Separations	Patient-Days	Average Length of Stay (Days)
	Percentage Distri- bution ⁽²⁾	Percentage Distri- bution ⁽²⁾	
XI DELIVERIES AND COMPLICATIONS OF PREGNANCY, CHILDBIRTH AND THE PUERPERIUM	21.36	11.04	5.7
73. Complications of pregnancy	2.66	1.06	4.4
74. Abortions	2.08	0.78	4.2
75. Delivery without mention of complications	15.20	8.01	5.9
76. Delivery with specified complications	1.30	1.09	9.4
77. Complications of the puerperium	0.12	0.10	9.5
XII DISEASES OF THE SKIN AND CELLULAR TISSUE	2.42	1.97	9.0
78. Infection of skin and subcutaneous tissue	1.21	0.81	7.4
79. Other diseases of skin and subcutaneous tissue	1.21	1.16	10.6
XIII DISEASES OF BONES AND ORGANS OF MOVEMENT	3.10	4.93	17.7
80. Arthritis and rheumatism, except rheumatic fever	1.20	2.36	22.0
81. Displacement of intervertebral disc	0.58	0.93	17.8
82. Other diseases of bones and organs of movement	1.32	1.64	13.8
XIV CONGENITAL MALFORMATIONS	0.90	1.18	14.6
83. Congenital malformations	0.90	1.18	14.6
XV CERTAIN DISEASES OF EARLY INFANCY	0.61	0.64	11.6
84. Certain diseases of early infancy	0.61	0.64	11.6
XVI SYMPTOMS, SENILITY AND ILL-DEFINED CONDITIONS	1.73	1.37	8.8
85. Symptoms, senility, and ill-defined conditions	1.73	1.37	8.8

TABLE 13 *Cont'd.*

Diagnostic Category Canadian List	Separation	Patient-Days	Average Length of Stay (Days)
	Percentage Distri- bution (2)	Percentage Distri- bution (2)	
XVII ACCIDENTS, POISONINGS, AND VIOLENCE (NATURE OF INJURY)	7.99	8.04	11.2
86. Fractures of and involving skull or face bones, and head injury, except open wound, contusion and haematoma of scalp	1.16	0.74	7.1
87. Fracture of spine and trunk	0.45	0.83	20.8
88. Fracture of upper limb	1.13	0.59	5.9
89. Fracture of femur	0.49	2.11	47.4
90. Other fractures of lower limbs (excluding femur)	0.79	1.14	16.0
91. Dislocation without fracture, and sprains and strains of joints and adjacent muscles	0.66	0.50	8.5
92. Internal injury of chest, abdomen and pelvis	0.09	0.11	13.9
93. Burns	0.26	0.39	17.0
94. Other and unspecified effects of accidents, poisonings and violence	2.96	1.63	6.1
Y SUPPLEMENTARY CLASSIFICATIONS FOR SPECIAL ADMISSIONS, LIVEBIRTHS AND STILLBIRTHS	0.35	0.59	18.4
95. Medical or special examination (without sickness)	0.01	0.00	2.4
96. Mature liveborn	—	—	—
97. Immature newborn	—	—	—
98. Other special admissions, examinations, etc.	0.34	0.59	19.1

- (1) The basic data concerns provincial hospital insurance plan in-patients hospitalized within the respective provinces with the following modifications and exceptions.
- (a) Prince Edward Island – Included separations, from public general hospitals, who were not the responsibility of the Provincial Plan.
 - (b) Nova Scotia – Included out-of-province hospitalization of beneficiaries.
 - (c) Quebec – Included out-of-province hospitalization of beneficiaries.
 - (d) Ontario – Included separations from hospitals in Ontario who were not the responsibility of the Provincial Plan. Also included out-of-province hospitalization of beneficiaries.
 - (e) Saskatchewan – Included out-of-province hospitalization of beneficiaries but did not include separations from geriatric hospitals at Regina, Saskatoon and Melfort.

TABLE 13 *Cont'd.*

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- (1) (f) British Columbia – The British Columbia program covers only the active treatment portion of care with respect to rehabilitation and chronic patients, (and does not cover the custodial portion of care.)
- (g) Yukon – Included separations from Yukon hospitals who were not the responsibility of the Yukon Hospital Insurance Service, also included out-of-Territories hospitalization of beneficiaries.
- (h) Northwest Territories – Included out-of-Territories hospitalization of beneficiaries.
- (2) Based on a total of 2,225,603 separations and 24,760,903 patient-days.

As might be expected, the broad grouping "XI. Deliveries and Complications of Pregnancy, Childbirth and Puerperium", accounted for the largest percentage of separated cases (21.4 per cent) among the 18 main diagnostic groupings, and the specific category "75. Delivery Without Mention of Complications" was the leading single cause of hospitalization (15.2 per cent of all separations) of the 98 specific diagnostic categories.(1) Among other frequently occurring diagnoses were "73. Complications of Pregnancy" in fifth place, and "74. Abortions" in eighth place. Although these diagnoses pertaining to pregnancy comprised more than one-fifth of all admissions, they accounted for only 11 per cent of patient days of care, because of the low average length of stay of 5.7 days. On the other hand, of course, the significance of pregnancy in hospital utilization in Canada is compounded by the accompanying requirement for newborn care. In 1961, 96.9 per cent of all births in Canada occurred in hospital.(2)

The grouping "VIII. Diseases of the Respiratory System" comprised 15.25 per cent of all separated cases reported in Table 14. With an average length of stay of only 6.2 days, however, respiratory conditions made up only about 8.6 per cent of all hospital days. Close to one-half of the diagnoses in this grouping were in the category "50. Hypertrophy of Tonsils and Adenoids", which with 7.3 per cent of all separations was the second most frequently occurring diagnosis reported. Included also in the grouping of respiratory conditions was "48. Pneumonia", in fourth place among reported diagnoses.

"IX. Diseases of the Digestive System" includes such conditions as appendicitis, duodenal ulcer, hernia of the abdominal cavity and diseases of the gallbladder and pancreas. This grouping accounted for approximately one-eighth of the hospital cases and of the hospital days, and had an average length of stay close to the overall average. Among the specific diagnoses in this grouping were "55. Appendicitis" in sixth place, "56 Hernia of Abdominal Cavity" in seventh place, and "61. Diseases of Gallbladder and Pancreas" in ninth place among the leading causes of morbidity.

The groupings "X. Diseases of the Genito-Urinary System" and "XVII. Accidents, Poisonings, and Violence" each contributed about eight per cent of the cases and eight per cent of the hospital days in the six provinces and two territories.

(1) In setting out the leading causes of hospital morbidity, 16 "residual" or "multiple" categories in the 98 list were excluded from consideration.

(2) Source: D.B.S. Vital Statistics, 1961.

Of major significance with respect to the volume of hospital care are a number of groupings containing many of the diagnostic categories involving long average lengths of stay in hospital. Among these were "VI. Diseases of the Nervous System and Sense Organs" with 22.6 days average stay, "VII. Diseases of the Circulatory System" with 21 days average stay, "V. Mental, Psychoneurotic and Personality Disorders", with 17.8 days average stay, "II. Neoplasms" with 17.6 days average stay, and "III. Allergic, Endocrine System, Metabolic and Nutritional Diseases" with 15.3 days average stay. Thus, for example, "VII. Diseases of the Circulatory System" made up 7.6 per cent of the cases, and 14.4 per cent of the days, and the grouping "II. Neoplasms" comprised 5.4 per cent of the cases and 8.6 per cent of the days. The specific category "38. Arteriosclerotic and Degenerative Heart Disease" was the third most frequently occurring diagnosis, and second only to "75. Delivery Without Mention of Complications", with respect to days of care. Such data demonstrate that long-term diseases like heart disease and cancer, have a major impact on the volume of hospital care because of the relatively long period of stay in hospital necessary for treatment.

HOSPITAL PERSONNEL

Table 14 shows the total number of persons employed on a full-time basis in hospitals listed in the Hospital Insurance Agreements in 1959, 1960, and 1961. By the end of 1961, these hospitals had about 186,000 full-time staff, excluding consideration of part-time personnel. For the various provinces there has been a steady increase in personnel from 1959 to 1961. Part of the increase reflects an increase of hospital usage and growth in the number of hospital beds. Part of the increase has been the result of the trend to the shorter work week and the resultant need for more staff to undertake a given quantity of work. But another factor has been the growth of special services and facilities which have increased the quantity of professional and technical services rendered in the care of each patient.

Table 15 shows the aggregate paid hours of work per patient day in budget review general hospitals in 1959, 1960 and 1961. Yearly increases are shown for each of the participating provinces, although the extent of the increase seems to vary considerably. Table 16 shows paid hours per patient day for nursing personnel separately from other personnel. There appears to have been a regular increase in nursing hours per patient day in all the provinces. Increases for other personnel are less, the jump from 1960 to 1961 being mainly caused by the inclusion of Quebec hospitals which had higher than average hours per day for non-nursing personnel.

TABLE 14
NUMBER OF PERSONS EMPLOYED FULL-TIME IN HOSPITALS LISTED IN HOSPITAL INSURANCE AGREEMENTS,
BY PROVINCE, AS AT DECEMBER 31, 1959, 1960 AND 1961

PROVINCE	1959		1960		1961	
	Number of Hospitals Reporting	Persons Employed Full-Time	Number of Hospitals Reporting	Persons Employed Full-Time	Number of Hospitals Reporting	Persons Employed Full-Time
Newfoundland	38	2,552	40	2,884	42	3,004
Prince Edward Island	—	—	9	860	9	908
Nova Scotia	48	6,110	48	6,945	48	7,452
New Brunswick	—	—	38	6,123	40	6,715
Quebec	—	—	—	—	243	51,503
Ontario	296	57,970	323	63,360	325	66,466
Manitoba	86	8,931	99	9,305	100	10,053
Saskatchewan	158	9,606	159	10,121	160	10,310
Alberta	116	12,575	121	13,312	122	13,982
British Columbia	105	13,663	111	14,852	111	15,298
Yukon	—	—	3	146	3	139
Northwest Territories	—	—	21	265	22	242
CANADA	847	111,407	972	128,173	1,225	186,072

TABLE 15

TOTAL PAID HOURS OF WORK PER PATIENT-DAY IN BUDGET REVIEW
GENERAL HOSPITALS, BY PROVINCE, 1959, 1960, 1961

PROVINCE	Total Paid Hours Per Patient-Day		
	1959	1960	1961
Newfoundland	12.4	13.0	14.0
Prince Edward Island	—	11.6	12.8
Nova Scotia	12.4	13.2	15.8
New Brunswick	—	12.3	12.9
Quebec	—	—	13.0
Ontario	12.6	12.7	12.9
Manitoba	12.2	12.8	13.1
Saskatchewan	10.7	11.1	11.2
Alberta	10.6	10.8	11.3
British Columbia	11.0	11.1	11.2
Yukon	—	—	10.6
Northwest Territories	—	—	12.1
CANADA	11.8	12.1	12.7

TABLE 16

TOTAL PAID HOURS OF NURSING AND OTHER PERSONNEL PER PATIENT-DAY
IN BUDGET REVIEW GENERAL HOSPITALS, BY PROVINCE, 1959, 1960, 1961

PROVINCE	Nursing Personnel			Other Personnel		
	1959	1960	1961	1959	1960	1961
Newfoundland	7.1	7.4	7.9	5.3	5.6	6.1
Prince Edward Island	—	6.7	7.3	—	4.9	5.4
Nova Scotia	6.5	7.1	8.2	5.9	6.1	7.5
New Brunswick	—	6.8	7.2	—	5.5	5.7
Quebec	—	—	6.4	—	—	6.6
Ontario	6.5	6.7	6.9	6.1	6.0	6.0
Manitoba	6.6	6.9	7.2	5.6	5.9	5.9
Saskatchewan	5.4	5.9	6.0	5.3	5.2	5.2
Alberta	5.8	6.0	6.3	4.8	4.8	5.0
British Columbia	5.9	6.0	6.1	5.1	5.1	5.1
Yukon	—	—	4.3	—	—	6.3
Northwest Territories	—	—	5.7	—	—	6.4
CANADA	6.2	6.5	6.7	5.6	5.6	6.0

HOSPITAL EXPENDITURES

This section of the report deals with the gross operating expenditures of budget review hospitals, expressed in terms of total amounts, expenditures per capita, and expenditures per patient day of care. It should be kept in mind that these revenue fund expenditures include a number of cost items which are not shareable by the federal government in accordance with the Hospital Insurance Regulations; on the other hand, the shareable expenses of payments to contract and federal hospitals are not included in these tables.

In 1961, the total revenue fund expenditures of budget review hospitals in the ten provinces and two territories was nearly \$700 million. Table 17 records these expenditures by province and shows substantial percentage gains in practically all provinces from 1960 to 1961 as well as in the previous period from 1959 to 1960. The percentage increases in 1961 ranged from 24.1 percent in Prince Edward Island to 3.4 percent in Saskatchewan.

When expressed in relation to population as in Table 19, there are wide differences in per capita expenditures of budget review hospitals among the provinces. While these partially reflect differences in hospital utilization and in hospital facilities, they may also reflect the extent to which a province or territory is dependent upon contract or federal hospitals for the provision of hospital care. Thus, for example, the relatively low per capita expenditure figures shown for Newfoundland, Yukon and the Northwest Territories in 1961 may be explained in part by the existence of several large contract hospitals in Newfoundland and of a number of contract and federal hospitals in the territories which provide a substantial proportion of the overall volume of care. Without exception to the end of 1961, per capita expenditures increased each year in each province.

Table 18 which relates expenditures to patient days is perhaps the best indicator of the cost variations among the provinces and of the degree to which hospital costs have been increasing in relation to the volume of care. Thus, it can be seen that expenditures per patient day in the participating provinces increased by \$1.54 between 1959 and 1960 and by \$1.67 between 1960 and 1961. Excluding the territories, the variations among the provinces ranged from \$24.26 per day in Ontario to \$19.04 in Prince Edward Island. It may be noted that provinces with substantial areas of thinly distributed rural population and many small hospitals to serve them, such as Newfoundland, Prince Edward Island, Manitoba, Saskatchewan and Alberta, had below average expenditures per patient day in their budget review hospitals.

TABLE 17

REVENUE FUND EXPENDITURES OF BUDGET REVIEW HOSPITALS,
BY PROVINCE, 1959-1961

PROVINCE	1959	1960		1961	
	Amount	Amount	Percent Gain Over 1959	Amount	Percent Gain Over 1960
Newfoundland	8,190,684	9,436,015	15.2	10,503,086	11.3
Prince Edward Island	—	2,575,236	—	3,196,662	24.1
Nova Scotia	18,601,394	22,158,661	19.1	24,911,388	12.4
New Brunswick	—	20,842,604	—	23,752,195	14.0
Quebec	—	—	—	181,950,631	—
Ontario	196,420,820	230,264,746	17.2	258,880,912	12.4
Manitoba	29,008,256	32,368,470	11.6	35,744,290	10.4
Saskatchewan	37,301,138	38,729,329	3.8	40,063,624	3.4
Alberta	43,145,759	47,058,143	9.1	51,678,260	9.8
British Columbia	52,353,677	59,618,610	13.9	64,543,328	8.3
Yukon	—	—	—	165,771	—
Northwest Territories	—	—	—	244,400	—
CANADA	385,021,728	463,051,814	—	695,634,547	—

TABLE 18

REVENUE FUND EXPENDITURES OF BUDGET REVIEW HOSPITALS PER
PATIENT DAY⁽¹⁾, BY PROVINCE, 1959-1961

PROVINCE	1959	1960	1961
Newfoundland	17.66	19.75	20.00
Prince Edward Island	—	16.74	19.04
Nova Scotia	18.56	21.45	23.66
New Brunswick	—	21.34	23.72
Quebec	—	—	22.63
Ontario	20.29	22.47	24.26
Manitoba	18.64	20.79	21.94
Saskatchewan	19.86	20.39	21.18
Alberta	17.36	18.49	20.42
British Columbia	21.75	22.60	23.85
Yukon	—	—	29.43
Northwest Territories	—	—	34.45
CANADA	19.77 ⁽²⁾	21.31 ⁽³⁾	23.01

(1) Patient-days during year for adults and children.

(2) Average for seven participating provinces.

(3) Average for nine participating provinces.

TABLE 19

REVENUE FUND EXPENDITURES OF BUDGET REVIEW HOSPITALS PER
CAPITA⁽¹⁾, BY PROVINCE, 1959-1961

PROVINCE	1959	1960	1961
Newfoundland	18.57	21.06	22.93
Prince Edward Island	—	25.00	30.55
Nova Scotia	25.87	30.47	33.80
New Brunswick	—	35.38	39.72
Quebec	—	—	34.59
Ontario	32.90	37.68	41.51
Manitoba	32.55	35.72	38.78
Saskatchewan	41.12	42.32	43.30
Alberta	34.57	36.45	38.79
British Columbia	33.41	37.21	39.61
Yukon	—	—	11.33
Northwest Territories	—	—	10.62
CANADA	32.68 ⁽²⁾	36.48 ⁽³⁾	38.14

(1) Based on Revised Intercensal Population Estimates as at June 1st and 1961 Census of Population. Dominion Bureau of Statistics.

(2) Based on population of seven provinces.

(3) Based on population of nine provinces.

The main element which made up revenue fund expenditures in 1961 are shown by category in the four appendix tables A16, A17, A18, and A19. As in the two previous years, the category of salaries and wages accounted for between 64 and 65 percent of expenditures in 1961. The variation among provinces was substantial with the four Atlantic Provinces, Yukon and the Northwest Territories having percentages well below the national average. The average cost was \$14.84 per patient day. The cost of medical and surgical supplies show small variation between the provinces with an average cost per patient day of 73 cents, down from 74 cents in 1960. Drug costs per patient day went up from 94 cents to 99 cents, and raw food costs increased from \$1.43 to \$1.46 per patient day. Included under the heading "Other Supplies and Expense" are fuel, electricity, water, insurance, replacements of bedding and linen, laundry supplies, housekeeping and cleaning supplies, repairs to buildings, furniture and equipment, maintenance of physical plant, printing, postage, stationary office supplies and telephones. The main items included under the heading "Other Revenue Fund Expense" are depreciation and interest.

In summary, it is apparent that hospital operating expenditures have risen substantially during the first three full years of the federal-provincial hospital insurance program. However, in six of the seven provinces that participated throughout the three year period, the percentage rise in 1961 was lower than the percentage rise in 1960. Among the main factors contributing to the rise of hospital expenditures have been the growth of staff-patient ratios and payroll costs, the continuing application of new techniques and equipment in medical care, price inflation, population growth, increased utilization of hospitals per unit of population, and further inclusion of chronic and long-term care facilities in the program.

APPENDIX TABLES

TABLE A1 *Cont'd.*

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- (1) Based on annual average number of insured persons under Provincial Plans, Health Insurance, Department of National Health and Welfare.
 - (2) Preliminary estimate.
 - (3) Provincial Plan responsibility days for hospitals located in the respective provinces, excluding out-of-province insured hospital care.
 - (4) Includes an estimated 35,000 days in Lancaster D.V.A. Hospital.
 - (5) Excluding 60 Quebec hospitals not reporting Provincial Plan days.
 - (6) Includes an estimated 5,694 days in Lady Willingdon Indian Hospital.
 - (7) Includes an estimated 59,734 days in Deer Lodge Veterans Hospital.

TABLE A2

TOTAL PATIENT DAYS DURING YEAR, IN HOSPITALS LISTED IN HOSPITAL INSURANCE AGREEMENTS,
ADULTS AND CHILDREN, NUMBER AND PERCENTAGE DISTRIBUTION, BY RESPONSIBILITY FOR PAYMENT,
BY PROVINCE, 1961

PROVINCE	Provincial Plan	Insured Residents Care not Responsibility of Provincial Plan	Uninsured Residents of Province	Non- Residents of Province	Workmen's Compen- sation Boards	Federal Government	Undis- tributed Days(1)	Total Patient Days	Number of Hospitals Reporting
Newfoundland	536,918	20,187	—	3,431	10,665	12,540	—	583,741	42
Prince Edward Island	149,805	3,629	4,209	3,334	1,720	5,186	—	167,883	9
Nova Scotia	1,051,424	2,901	2,027	16,171	17,198	89,750	—	1,179,471	48
New Brunswick(2)	976,537	14	— 291	36,717	21,859	88,293	—	1,123,129	40
Quebec(3)	8,077,091	19,978	13,480	85,303	116,342	618,737	510,643	9,441,574	282
Ontario(4)	11,141,030	20,826	248,608	152,017	232,206	677,868	109,852	12,582,407	331
Manitoba(5)	1,613,598	28,922	2,305	57,965	23,258	131,613	—	1,857,661	100
Saskatchewan	1,997,712	583	19,313	33,383	27,711	50,687	—	2,129,389	160
Alberta(6)	2,944,358	2,356	2,328	54,373	55,907	156,751	—	3,216,073	162
British Columbia	2,707,098	46,106	9,705	24,560	75,769	382,760	—	3,245,998	108
Yukon	24,871	219	—	2,590	1,183	1,130	—	29,993	3
Northwest Territories	27,402	277	64	2,606	885	10,764	—	41,998	22
CANADA	31,247,844	145,998	301,748	472,450	584,703	2,226,079	620,495	35,599,317	1,307

TABLE A 2 Cont'd.

PROVINCE	Provincial Plan	Insured Residents Care not Responsibility of Provincial Plan	Uninsured Residents of Province	Non-Residents of Province	Workmen's Compensation Boards	Federal Government	Undistributed Days (1)	Total Patient Days	Number of Hospitals Reporting
Newfoundland	92.0	3.5	—	0.6	1.8	2.1	—	100.0	
Prince Edward Island	89.2	2.2	2.5	2.0	1.0	3.1	—	100.0	
Nova Scotia	89.1	0.2	0.2	1.4	1.5	7.6	—	100.0	
New Brunswick	86.9	—	—	3.3	1.9	7.9	—	100.0	
Quebec	85.5	0.2	0.1	0.9	1.2	6.6	5.4	100.0	
Ontario	88.5	0.2	2.0	1.2	1.8	5.4	0.9	100.0	
Manitoba	86.9	1.6	0.1	3.1	1.2	7.1	—	100.0	
Saskatchewan	93.8	—	0.9	1.6	1.3	2.4	—	100.0	
Alberta	91.5	0.1	0.1	1.7	1.7	4.9	—	100.0	
British Columbia	83.4	1.4	0.3	0.8	2.3	11.8	—	100.0	
Yukon	82.9	0.7	—	8.6	4.0	3.8	—	100.0	
Northwest Territories	65.2	0.7	0.2	6.2	2.1	25.6	—	100.0	
CANADA	87.8	0.4	0.9	1.3	1.6	6.3	1.7	100.0	

(1) No information available on distribution by responsibility for payment.

(2) Includes an estimate of 35,000 Provincial Plan days, 85,000 federal days and 1598 Workmen's Compensation days in Lancaster D.V.A. Hospital. Negative value for uninsured residents represents adjustment for previous year.

(3) 12 hospitals did not report. Of 283 reporting hospitals 48 did not report distribution of patient days by responsibility for payment.

(4) Includes an estimate of 5,694 Provincial Plan days, 919 federal days, 413 uninsured resident days, and 22 non-resident days for Lady Willingdon Indian Hospital. The undistributed days represent non-Provincial Plan days in nursing homes.

(5) Includes an estimate of 59,734 Provincial Plan days, and 122,273 federal days in Deer Lodge Veterans Hospital.

(6) Includes 382,747 Provincial Plan days in nursing homes. No other nursing home days reported.

TABLE A3

TOTAL PATIENT DAYS DURING YEAR, ADMISSIONS, SEPARATIONS, ADULTS AND CHILDREN, IN HOSPITALS LISTED IN HOSPITAL INSURANCE AGREEMENTS, AND RATES PER 1,000 POPULATION(1), BY PROVINCE, 1961.

PROVINCE	Patient Days During Year			Admissions During Year			Separations During Year		
	Number Hospitals Reporting	Number Patient Days During Year	Rate Per 1,000 Population	Number Hospitals Reporting	Number Admissions During Year	Rate Per 1,000 Population	Number Hospitals Reporting	Number Separations During Year	Rate Per 1,000 Population
Nfld.	42	583,741	1275.0	42	50,915	111.2	42	50,869	111.1
P.E.I.	9	167,883	1604.6	9	16,225	155.1	9	16,202	154.8
N.S.	48	1,179,471	1600.4	48	109,270	148.3	48	109,273	148.3
N.B.	40	1,123,129	1878.3	40	104,333	174.5	40	104,232	174.3
Que.	282(2)	9,441,574	1795.2	275	725,535	138.0	275	722,909	137.4
Ont.	311(3)	12,582,407	2017.7	326	949,771	152.3	326	949,027	152.2
Man.	100	1,857,661	2015.5	100	165,555	179.6	100	165,244	179.3
Sask.	160	2,129,389	2301.6	160	199,448	215.6	160	199,236	215.3
Alta.	162(4)	3,216,073	2414.6	122(5)	261,617	194.4	122(5)	261,244	196.1
B.C.	108(6)	3,245,998	1992.5	108	285,835	175.4	108	285,744	175.4
Yukon	3	29,993	2050.4	3	3,491	238.6	3	3,458	236.4
N.W.T.	22(7)	41,998	1826.2	22	4,554	198.0	22	4,548	197.8
CANADA	1,307	35,599,317	1951.9	1,255	2,876,549	157.7	1,255	2,871,986	157.5

(1) Based on Census of Canada, 1961.

(2) Excludes 13 hospitals.

(3) Excludes 7 hospitals.

(4) Excludes 2 hospitals.

(5) Excludes 2 hospitals and 40 nursing homes.

(6) Excludes 4 hospitals.

(7) Excludes one hospital.

TABLE A4

NUMBER OF BEDS AND CRIBS SET UP ON DECEMBER 31, AND RATES PER 1,000 POPULATION⁽¹⁾, IN HOSPITALS LISTED IN HOSPITAL INSURANCE AGREEMENTS, BY PROVINCE, 1959 - 1961.

PROVINCE	Number of Hospitals Reporting			Beds and Cribs Set Up on December 31			Beds and Cribs Set up Per 1,000 Population ⁽¹⁾		
	1959	1960	1961	1959	1960	1961	1959	1960	1961
Newfoundland	40	40	42	1,946	1,968	1,982	4.4	4.4	4.3
Prince Edward Island	9	9	9	643	649	651	6.4	6.3	6.2
Nova Scotia	48	48	48	3,991	4,003	4,138	5.6	5.5	5.6
New Brunswick	38	38	40	3,431	3,593	3,709	5.9	6.1	6.2
Quebec	-	-	281	-	-	32,338	-	-	6.1
Ontario	304	326	331	37,690	39,687	41,389	6.3	6.5	6.6
Manitoba	90	99	100	6,193	6,559	6,685	6.9	7.2	7.3
Saskatchewan	165	167	160	7,540	7,546	7,578	8.3	8.2	8.2
Alberta	118	159	162	9,828	11,069	11,382	7.9	8.6	8.5
British Columbia	108	112	111	10,008	10,520	10,710	6.4	6.6	6.6
Yukon	-	3	3	-	157	157	-	11.2	10.7
Northwest Territories	-	23	22	-	427	327	-	19.4	14.2
CANADA	920	1,024	1,309	81,270	86,178	121,046	6.5	6.8	6.6

(1) Based on Census of Canada and Revised Intercensal Estimates as of June 1, Dominion Bureau of Statistics.

TABLE A5
NUMBER AND PERCENTAGE DISTRIBUTION OF HOSPITALS⁽¹⁾ AND OTHER FACILITIES LISTED IN HOSPITAL
INSURANCE AGREEMENTS, BY STATUS OF HOSPITAL, BY PROVINCE, DECEMBER 31, 1961

PROVINCE	Number				Percent		
	Budget Review	Contract	Federal Gov't.	Total	Budget Review	Contract	Federal Gov't.
Newfoundland	36	6	1	43	83.7	13.9	2.3
Prince Edward Island	10	1	—	11	90.9	9.1	—
Nova Scotia	48	1	1	50	96.0	2.0	2.0
New Brunswick ⁽¹⁾	38	1	2	41	92.7	2.4	4.9
Quebec	157	125	14	296	53.0	42.2	4.7
Ontario	212	116	13	341	62.4	33.8	3.8
Manitoba ⁽¹⁾	80	8	15	103	77.6	7.8	14.6
Saskatchewan	155	10	6	171	90.6	5.9	3.5
Alberta	117	44	7	168	69.6	26.2	4.2
British Columbia	91	16	6	113	80.5	14.2	5.3
Yukon	2	1	1	4	50.0	25.0	25.0
Northwest Territories	1	11	13	25	4.0	44.0	52.0
CANADA	947 ⁽²⁾	340 ⁽³⁾	79	1,366	69.3	24.9	5.8
							100.0

(1) Excludes hospitals located in the U.S.A. near the Canadian border listed in the Agreements for New Brunswick and Manitoba.

(2) Includes eight "other facilities" as follows: Provincial Laboratories in Prince Edward Island, Saskatchewan, and Alberta, cancer clinics in Manitoba, Saskatchewan (2) and Alberta, and a medical centre in Nova Scotia.

(3) Includes 18 Red Cross Blood Depots in ten provinces and two territories.

TABLE A6

NUMBER AND PERCENTAGE DISTRIBUTION OF BEDS AND CRIBS SET UP, ON DECEMBER 31, IN HOSPITALS LISTED
IN HOSPITAL INSURANCE AGREEMENTS, BY STATUS OF HOSPITAL, BY PROVINCE, 1961.

PROVINCE	Number of Hospitals Reporting	Number			Percent				
		Budget Review	Contract	Federal Gov't.	Total	Budget Review	Contract	Federal Gov't.	Total
Newfoundland	42	1,807	137	38	1,982	91.2	6.9	1.9	100.0
Prince Edward Island	9	651	—	—	651	100.0	—	—	100.0
Nova Scotia	48	3,691	—	447	4,138	89.2	—	10.8	100.0
New Brunswick	40	3,272	—	437	3,709	88.2	—	11.8	100.0
Quebec	281	27,063	2,985	2,290	32,338	83.7	9.2	7.1	100.0
Ontario	331	35,161	2,780	3,448	41,389	85.0	6.7	8.3	100.0
Manitoba	100	5,693	113	879	6,685	85.2	1.7	13.1	100.0
Saskatchewan	160	7,368	40	170	7,578	97.2	0.5	2.2	100.0
Alberta	162	9,152	1,232	998	11,382	80.4	10.8	8.8	100.0
British Columbia	111	9,144	105	1,461	10,710	85.4	1.0	13.6	100.0
Yukon	3	37	—	120	157	23.6	—	76.4	100.0
Northwest Territories	22	44	210	73	327	13.5	64.2	22.3	100.0
CANADA	1,309	103,083	7,602	10,361	121,046	85.2	6.3	8.6	100.0

TABLE A7

NUMBER AND PERCENTAGE DISTRIBUTION OF PATIENT DAYS DURING YEAR, ADULTS AND CHILDREN, IN HOSPITALS LISTED IN HOSPITAL INSURANCE AGREEMENTS, BY STATUS OF HOSPITAL, BY PROVINCE, 1961

PROVINCE	Number of Hospitals Reporting	Number				Percent			
		Budget Review	Contract	Federal Gov't	Total	Budget Review	Contract	Federal Gov't	Total
Newfoundland	42	535,640	42,352	5,749	583,741	91.8	7.2	1.0	100.0
Prince Edward Island	9	167,883	-	-	167,883	100.0	-	-	100.0
Nova Scotia	48	1,052,952	-	126,519	1,179,471	89.3	-	10.7	100.0
New Brunswick	40	1,001,531	-	121,598	1,123,129	89.2	-	10.8	100.0
Quebec	282	8,010,659	785,964	644,951	9,441,574	84.8	8.3	6.8	100.0
Ontario	331	10,709,813	898,860	973,734	12,582,407	85.1	7.2	7.7	100.0
Manitoba	100	1,629,334	19,696	208,631	1,857,661	87.7	1.1	11.2	100.0
Saskatchewan	160	2,080,707	6,963	41,719	2,129,389	97.7	0.3	2.0	100.0
Alberta	162	2,561,246	384,970	269,857	3,216,073	79.6	12.0	8.4	100.0
British Columbia	108	2,705,867	13,173	526,958	3,245,998	83.4	0.4	16.2	100.0
Yukon	3	5,633	-	24,360	29,993	18.8	-	81.2	100.0
Northwest Territories	22	7,095	27,500	7,403	41,998	16.9	65.5	17.6	100.0
CANADA	1,307	30,468,360	2,179,478	2,951,479	35,599,317	85.6	6.1	8.3	100.0

TABLE A8

BUDGET REVIEW HOSPITALS: NUMBER AND PERCENTAGE DISTRIBUTION OF PATIENT DAYS DURING YEAR, ADULTS AND CHILDREN, AND PERCENTAGE OCCUPANCY, BY TYPE OF ACCOMMODATION, BY PROVINCE, 1961

PROVINCE	Number of Hospitals Reporting	Standard Ward			Preferred Accommodation					Total Accommodation	
		Patient Days During Year	Percent of Total	Percentage Occupancy	Patient Days During Year			Percent of Total	Percentage Occupancy	Patient Days During Year	Percentage Occupancy
					Private	Semi-Private	Total				
Nfld.	36	481,668	89.9	83.3	20,717	33,255	53,972	10.1	66.6	535,640	81.2
P.E.I.	9	128,409	76.5	89.1	8,847	30,627	39,474	23.5	42.2	167,883	70.7
N.S.	47	757,857	72.0	87.4	120,768	174,327	295,095	28.0	60.7	1,052,952	77.8
N.B.	38	660,507	65.9	92.0	105,092	235,932	341,024	34.1	71.6	1,001,531	83.9
Que.	155	4,769,187	60.4	91.4	1,007,699	2,117,821	3,125,520	39.6	69.3	7,894,707 ⁽¹⁾	81.1
Ont.	211	6,412,577	59.9	89.6	906,911	3,390,325	4,297,236	40.1	75.7	10,709,813	83.5
Man.	79	1,318,733	80.9	81.0	54,832	255,769	310,601	19.1	69.0	1,629,334	78.4
Sask.	152	1,810,517	87.0	83.8	105,643	164,547	270,190	13.0	51.1	2,080,707	77.4
Alta.	115	2,164,208	84.5	81.5	135,971	261,067	397,038	15.5	58.0	2,561,246	76.7
B.C.	89	2,089,158	80.1	88.2	181,203	337,434	518,637	19.9	62.2	2,607,795 ⁽²⁾	81.4
Yukon	2	5,486	97.4	44.2	—	147	147	2.6	13.4	5,633	41.7
N.W.T.	1	7,095	100.0	44.2	—	—	—	—	—	7,095	44.2
CANADA	934	20,605,402	68.1	87.6	2,647,683	7,001,251	9,648,934	31.9	69.8	30,254,336 ⁽³⁾	81.0

(1) Excludes 115,952 days with distribution by type of accommodation not reported.

(2) Excludes 98,072 days as per footnote (1).

(3) Excludes 214,024 days as per footnote (1).

TABLE A9

BUDGET REVIEW GENERAL HOSPITALS: PERCENTAGE OCCUPANCY⁽¹⁾ BY
BED-SIZE OF HOSPITAL AND BY PROVINCE, 1961

PROVINCE	Number of Hospitals Reporting	Bed-Size of Hospital (Rated Bed Capacity)										Total
		1-9	10-24	25-49	50-99	100-199	200-299	300-499	500-999	1000 and over		
Newfoundland	36	33.3	61.4	66.7	74.9	98.4	-	97.9	-	-	81.2	
Prince Edward Island	8	62.0	35.2	65.5	53.4	80.8	63.1	-	-	-	69.8	
Nova Scotia	44	41.7	59.1	72.9	75.0	74.9	78.1	-	94.0	-	77.6	
New Brunswick	35	89.5	81.9	61.7	85.5	84.0	88.4	-	83.8	-	84.3	
Quebec	122	76.8	60.6	72.8	75.7	78.0	76.0	80.7	87.2	83.5	80.7	
Ontario	187	-	58.1	70.4	75.5	81.5	78.0	84.7	88.5	89.2	82.3	
Manitoba	74	65.3	57.8	66.7	72.9	77.1	83.3	84.9	88.7	-	77.4	
Saskatchewan	149	52.6	65.3	70.4	76.8	80.8	85.9	87.9	80.7	-	76.0	
Alberta	101	52.3	56.4	66.9	67.6	79.2	72.2	88.7	87.8	85.3	76.4	
British Columbia	86	-	59.6	74.0	76.1	81.9	77.5	88.5	87.5	90.5	81.0	
Yukon	2	-	41.7	-	-	-	-	-	-	-	41.7	
Northwest Territories	1	-	-	44.2	-	-	-	-	-	-	44.2	
CANADA	845	52.8	61.8	70.0	74.7	80.3	79.1	84.6	87.5	87.3	80.3	

(1) Patient days as a percentage of 365 times beds set up on December 31. Excludes bassinets and newborn days.

TABLE A10

BUDGET REVIEW GENERAL HOSPITALS: AVERAGE LENGTH OF STAY⁽¹⁾, ADULTS AND CHILDREN, BY BED-SIZE OF HOSPITAL AND BY PROVINCE, 1961

PROVINCE	Number of Hospitals Reporting	Bed-Size of Hospital (Rated Bed Capacity)									Total
		1-9	10-24	25-49	50-99	100-199	200-299	300-499	500-999	1000 and over	
Newfoundland	35 ⁽²⁾	6.2	6.4	7.3	12.5	9.6	—	27.8	—	—	11.4
Prince Edward Island	8	7.9	6.7	8.0	7.2	10.8	10.2	—	—	—	9.9
Nova Scotia	44	7.2	7.2	8.1	9.7	9.2	10.7	—	13.0	—	9.8
New Brunswick	35	6.8	7.4	7.3	8.0	8.9	9.6	—	15.8	—	9.4
Quebec	122	4.6	7.5	6.4	8.2	8.7	10.1	10.7	13.3	13.8	10.4
Ontario	187	—	7.8	9.1	9.8	8.8	10.1	10.4	11.6	14.8	10.4
Manitoba	74	8.1	7.0	6.8	8.4	9.0	8.0	9.0	11.6	—	8.9
Saskatchewan	149	7.5	7.4	7.8	8.2	9.9	13.5	12.0	13.8	—	9.7
Alberta	101	5.3	7.0	6.7	8.0	9.4	9.1	9.7	9.6	16.2	9.0
British Columbia	86	—	7.4	8.3	8.6	8.8	8.7	11.3	11.2	13.7	9.7
Yukon	2	—	8.5	—	—	—	—	—	—	—	8.5
Northwest Territories	1	—	—	6.7	—	—	—	—	—	—	6.7
CANADA	844 ⁽²⁾	6.9	7.2	7.7	8.8	8.9	10.0	11.0	12.1	14.4	10.0

(1) Based on patient-days since admission of separations divided by separations.

(2) Excludes one hospital for which no patient days have been reported.

TABLE A11

BUDGET REVIEW CHRONIC AND CONVALESCENT HOSPITALS; BEDS SET UP ON DECEMBER 31, AVERAGE LENGTH OF STAY, AND PERCENTAGE OCCUPANCY BY PROVINCE, 1961

PROVINCE	Number of Hospitals Reporting	Beds and Cribs Set up on December 31	Average Length of Stay		Percentage Occupancy
			Patient Days During Year Divided by Separations	Patient Days of Separations Divided by Separations	
Newfoundland	-	-	-	-	-
Prince Edward Island	-	-	-	-	-
Nova Scotia	1	53	27.9	27.1	79.6
New Brunswick	-	-	-	-	-
Quebec	20	3,558	238.1	158.2	90.1
Ontario	22	3,934	225.6	213.7	93.8
Manitoba	5	957	95.9	91.7	83.3
Saskatchewan	-	-	-	-	-
Alberta	10	846	602.0	505.0	86.6
British Columbia	1	56	323.2	97.9	98.0
Yukon	-	-	-	-	-
Northwest Territories	-	-	-	-	-
CANADA	59	9,404	207.8	171.3	90.6

TABLE A12

CONTRACT AND FEDERAL HOSPITALS; NUMBER OF BEDS AND CRIBS SET UP,
ON DECEMBER 31, BY TYPE OF UNIT, BY PROVINCE, 1961

PROVINCE	No. of Hospitals Reporting	Acute Treatment				Chronic Convales- cent ⁽²⁾	Total
		General ⁽¹⁾	Paediatric	Obstetric	Total		
CONTRACT							
Newfoundland	5	48	2	1	51	86	137
Prince Edward Island	—	—	—	—	—	—	—
Nova Scotia	—	—	—	—	—	—	—
New Brunswick	—	—	—	—	—	—	—
Quebec	114	610	115	279	1,004	1,472	2,985 ⁽³⁾
Ontario	109	787	78	115	980	1,800	2,780
Manitoba	7	75	18	20	113	—	113
Saskatchewan	5	15	6	19	40	—	40
Alberta	2	16	—	6	22	—	22
British Columbia	14	93	7	5	105	—	105
Yukon	—	—	—	—	—	—	—
Northwest Territories	9	134	44	20	198	12	210
CANADA	265	1,778	270	465	2,513	3,370	6,392 ⁽³⁾
FEDERAL GOVERNMENT							
Newfoundland	1	21	7	10	38	—	38
Prince Edward Island	—	—	—	—	—	—	—
Nova Scotia	1	284	—	—	284	163	447
New Brunswick	2	312	—	—	312	125	437
Quebec	11	1,527	8	10	1,545	745	2,290
Ontario	11	2,394	64	27	2,485	963	3,448
Manitoba	14	596	36	28	660	219	879
Saskatchewan	3	72	47	11	130	40	170
Alberta	5	501	133	20	654	344	998
British Columbia	6	903	67	3	973	488	1,461
Yukon	1	64	32	24	120	—	120
Northwest Territories	12	39	24	10	73	—	73
CANADA	67	6,713	418	143	7,274	3,087	10,361

(1) Includes medicine-surgery, isolation, orthopaedic and other acute treatment beds excluding paediatric and obstetric.

(2) Includes long-term tuberculosis and other beds specified chronic, convalescent, geriatric or rehabilitation.

(3) Includes 509 beds not specified as to type.

TABLE A13

CONTRACT AND FEDERAL HOSPITALS: AVERAGE LENGTH OF STAY AND PERCENTAGE OCCUPANCY, BY PROVINCE, 1961.

PROVINCE	Average Length of Stay ⁽¹⁾		Average Length of Stay ⁽²⁾		Percentage Occupancy ⁽³⁾	
	Contract	Federal	Contract	Federal	Contract	Federal
Newfoundland	14.4	5.2	13.4	5.1	84.7	41.4
Prince Edward Island	-	-	-	-	-	-
Nova Scotia	-	35.1	-	16.4	-	77.5
New Brunswick	-	33.0	-	33.8	-	76.2
Quebec	15.7	49.6	12.4	52.5	72.0	77.2
Ontario	24.4	56.1	20.8	44.2	86.8	77.4
Manitoba	7.6	21.9	7.6	23.3	47.8	65.0
Saskatchewan	6.8	16.6	6.9	15.3	47.7	67.2
Alberta	6.6	30.8	6.6	33.2	27.7	74.1
British Columbia	4.8	38.3	4.8	39.3	37.6	80.6
Yukon	-	8.6	-	8.3	-	55.6
Northwest Territories	11.3	6.9	14.3	7.0	35.9	27.8
CANADA	18.1	38.2	15.1	35.7	76.2	75.4

(1) Patient days during year divided by separations.

(2) Patient days of separations divided by separations.

(3) Patient days as a percentage of 365 times beds set up on December 31.

HOSPITALIZATION BY AGE AND SEX, PROVINCIAL PLAN IN-PATIENTS⁽¹⁾, NEWFOUNDLAND, 1961

1851

	0-4	5-14	15-24	25-44	45-64	65-69	70+	Total Excluding Newborn
SEPARATIONS								
Male	4,738	3,134	2,087	3,411	2,948	550	1,110	17,990 ⁽²⁾
Female	3,417	2,750	8,676	13,560	3,034	544	984	32,981 ⁽³⁾
Total	8,155	5,884	10,763	16,971	5,982	1,094	2,094	50,971
SEPARATIONS PER 1000 POPULATION								
Male	137.7	49.8	56.1	64.2	87.4	113.2	127.7	76.6
Female	102.6	45.1	235.5	281.9	99.9	112.8	115.5	147.9
Total	120.5	47.5	145.3	167.6	93.4	113.0	121.7	111.3
PATIENT DAYS SINCE ADMISSION								
Male	62,499	43,859	22,743	42,618	48,432	10,208	25,405	255,838 ⁽⁵⁾
Female	51,608	35,226	51,488	90,789	46,899	11,135	23,064	310,400 ⁽⁶⁾
Total	114,107	79,085	74,231	133,407	95,331	21,343	48,469	566,238 ⁽⁷⁾
DAYS SINCE ADMISSION PER 1000 POPULATION								
Male	1816.7	697.5	610.9	801.9	1436.4	2100.4	2922.5	1089.0
Female	1550.1	577.6	1397.7	1887.2	1544.9	2308.3	2707.7	1392.4
Total	1685.6	638.5	1002.2	1317.5	1487.8	2203.9	2816.2	1236.7
AVERAGE STAY OF SEPARATIONS								
Male	13.2	14.0	10.9	12.5	16.4	18.6	22.9	14.2
Female	15.1	12.8	5.9	6.7	15.5	20.5	23.4	9.4
Total	14.0	13.4	6.9	7.9	15.9	19.5	23.1	11.1

(1) Including out-of-province hospitalization but excluding newborns, which was not available.

(2) Includes 12 separations, age unknown.

(3) Includes 16 separations, age unknown.

(4) Includes 28 separations, age unknown.

(5) Includes 74 patient-days, age unknown.

(6) Includes 191 patient-days, age unknown.

(7) Includes 265 patient-days, age unknown.

TABLE A14

HOSPITALIZATION BY AGE AND SEX, PUBLIC GENERAL HOSPITAL IN-PATIENTS⁽¹⁾, PRINCE EDWARD ISLAND, 1961

	Newborn	0-4 ⁽²⁾	5-14	15-24	25-44	45-64	65-69	70+	Total Excluding Newborn
SEPARATIONS									
Male	1,469	1,138	836	537	891	1,353	416	1,054	6,225
Female	1,365	871	725	1,984	3,520	1,357	401	1,134	9,992
Total	2,834	2,009	1,561	2,521	4,411	2,710	817	2,188	16,217
SEPARATIONS PER 1000 POPULATION									
Male	-	170.6	67.2	68.2	77.9	140.3	232.5	302.4	116.7
Female	-	132.9	60.3	270.2	319.7	156.4	223.6	293.6	194.9
Total	-	152.0	63.8	165.6	196.4	147.9	228.1	297.8	155.0
PATIENT DAYS SINCE ADMISSION									
Male	8,582	9,397	6,646	3,843	9,381	18,747	5,967	18,546	72,527
Female	7,869	7,187	7,255	11,325	23,655	17,943	7,956	21,652	96,973
Total	16,451	16,584	13,901	15,168	33,036	36,690	13,923	40,198	169,500
DAYS SINCE ADMISSION PER 1000 POPULATION									
Male	-	1409.1	533.9	488.0	819.7	1943.7	3335.4	5320.1	1359.3
Female	-	1096.9	603.0	1542.1	2148.1	2067.6	4437.3	5606.4	1891.3
Total	-	1254.4	567.9	996.6	1471.1	2002.4	3886.9	5470.6	1620.0
AVERAGE STAY OF SEPARATIONS									
Male	5.8	8.3	7.9	7.2	10.5	13.9	14.3	17.6	11.6
Female	5.8	8.3	10.0	5.7	6.7	13.2	19.8	19.1	9.7
Total	5.8	8.3	8.9	6.0	7.5	13.5	17.0	18.4	10.5

(1) Includes data on separations which are the responsibility of the Provincial Plan *plus* those not the responsibility of the Provincial Plan, who were hospitalized in public general hospitals. Out-of-province claims not included.

(2) Excluding newborn.

TABLE A14

HOSPITALIZATION BY AGE AND SEX, PROVINCIAL PLAN IN-PATIENTS⁽¹⁾, NOVA SCOTIA, 1961

	Newborn	0-4 ⁽²⁾	5-14	15-24	25-44	45-64	65-69	70+	Total Excluding Newborn
SEPARATIONS									
Male	9,838	6,586	6,398	3,514	5,655	8,639	2,288	5,924	39,004
Female	9,324	4,736	5,527	15,266	23,351	9,165	2,006	5,726	65,777
Total	19,162	11,322	11,925	18,780	29,006	17,804	4,294	11,650	104,781
SEPARATIONS PER 1000 POPULATION									
Male	-	141.1	75.7	59.9	63.9	132.0	218.9	297.2	104.2
Female	-	106.3	68.6	278.4	264.1	149.4	184.3	258.6	181.3
Total	-	124.1	72.2	165.4	163.9	140.4	201.2	276.9	142.2
PATIENT DAYS SINCE ADMISSION									
Male	60,252	56,947	41,714	29,569	60,967	124,587	38,836	106,574	459,194
Female	59,067	41,177	33,284	87,295	163,887	120,854	31,874	111,282	589,653
Total	119,319	98,124	74,998	116,864	224,854	245,441	70,710	217,856	1,048,847
DAYS SINCE ADMISSION PER 1000 POPULATION									
Male	-	1219.9	493.6	503.7	688.8	1903.9	3714.9	5346.6	1227.0
Female	-	924.1	413.1	1591.8	1853.5	1970.3	2927.7	5025.6	1625.4
Total	-	1075.5	454.3	1029.2	1270.8	1936.0	3313.3	5177.7	1423.1
AVERAGE STAY OF SEPARATIONS									
Male	6.1	8.6	6.5	8.4	10.8	14.4	17.0	18.0	11.8
Female	6.3	8.7	6.0	5.7	7.0	13.2	15.9	19.4	9.0
Total	6.2	8.7	6.3	6.2	7.8	13.8	16.5	18.7	10.0

(1) Including those hospitalized outside the province.

(2) Excluding newborn.

TABLE A14

HOSPITALIZATION BY AGE AND SEX, PROVINCIAL PLAN IN-PATIENTS⁽¹⁾, NEW BRUNSWICK, 1961

	Newborn	0-4 ⁽²⁾	5-14	15-24	25-44	45-64	65-69	70+	Total Excluding Newborn
SEPARATIONS									
Male	8,252	6,763	6,593	3,751	5,900	6,893	1,550	4,212	35,662
Female	7,774	4,794	6,122	12,940	22,559	8,150	1,772	4,440	60,777
Total	16,026	11,557	12,715	16,691	28,459	15,043	3,322	8,652	96,439
SEPARATIONS PER 1000 POPULATION									
Male	—	167.3	87.1	81.2	86.2	141.0	191.9	285.7	117.9
Female	—	125.7	83.9	289.4	327.5	174.5	217.7	278.2	205.7
Total	—	147.1	85.5	183.6	207.3	157.3	204.9	281.8	161.3
PATIENT DAYS SINCE ADMISSION									
Male	46,425	63,978	51,220	32,275	56,744	94,428	25,429	82,892	406,966
Female	43,168	47,422	40,555	77,902	156,434	112,465	30,136	91,586	556,500
Total	89,593	111,400	91,775	110,177	213,178	206,893	55,565	174,478	963,466
DAYS SINCE ADMISSION PER 1000 POPULATION									
Male	—	1582.4	676.9	698.4	829.5	1931.1	3148.7	5623.2	1345.6
Female	—	1243.7	555.9	1742.0	2271.3	2407.5	3702.2	5738.5	1883.3
Total	—	1418.0	617.5	1211.6	1552.8	2163.9	3426.6	5683.1	1611.3
AVERAGE STAY OF SEPARATIONS									
Male	5.6	9.5	7.8	8.6	9.6	13.7	16.4	19.7	11.4
Female	5.6	9.9	6.6	6.0	6.9	13.8	17.0	20.6	9.2
Total	5.6	9.6	7.2	6.6	7.5	13.8	16.7	20.2	10.0

(1) Includes out-of-province hospitalization.

(2) Excluding newborn.

TABLE A14

HOSPITALIZATION BY AGE AND SEX, IN-PATIENTS⁽¹⁾, QUEBEC, 1961

	Newborn	0-4 ⁽²⁾	5-14	15-24	25-44	45-64	65-69	70+	Total Excluding Newborn
SEPARATIONS									
Male	56,855	56,297	45,419	29,682	57,342	56,310	10,753	20,195	275,998
Female	59,042	35,880	39,002	86,966	178,622	57,929	10,261	19,548	428,208
Total	115,897	92,177	84,421	116,648	235,964	114,239	21,014	39,743	704,206
SEPARATIONS PER 1000 POPULATION									
Male	-	164.3	74.6	71.2	82.5	132.9	189.6	229.5	104.9
Female	-	109.2	66.8	207.0	252.9	135.6	170.4	192.8	163.0
Total	-	137.3	70.8	139.4	168.4	134.3	179.7	209.9	133.9
PATIENT DAYS SINCE ADMISSION									
Male	336,353	512,361	296,163	251,033	607,584	832,040	212,010	468,230	3,179,421
Female	350,003	360,549	242,929	577,590	1,448,275	905,815	197,167	485,506	4,217,831
Total	686,356	872,910	539,092	828,623	2,055,859	1,737,855	409,177	953,736	7,397,252
DAYS SINCE ADMISSION PER 1000									
Male	-	1495.6	486.6	602.2	873.8	1963.6	3738.6	5321.3	1208.1
Female	-	1097.0	416.3	1374.6	2050.7	2120.5	3274.4	4788.7	1605.4
Total	-	1300.4	452.2	989.9	1466.8	2042.4	3499.5	5036.1	1406.5
AVERAGE STAY OF SEPARATIONS									
Male	5.9	9.1	6.5	8.5	10.6	14.8	19.7	23.2	11.5
Female	5.9	10.0	6.2	6.6	8.1	15.6	19.2	24.8	9.8
Total	5.9	9.5	6.4	7.1	8.7	15.2	19.5	24.0	10.5

(1) Includes "Provincial Plan" in-patients and also those not the responsibility of the Provincial Plan. Also included are "provincial plan" patients hospitalized in other provinces and other countries.

(2) Excluding newborn.

TABLE A14

HOSPITALIZATION BY AGE AND SEX, PROVINCIAL PLAN IN-PATIENTS⁽¹⁾, ONTARIO, 1961

	Newborn	0-4 ⁽²⁾	5-14	15-24	25-44	45-64	65-69	70+	Total Excluding Newborn
SEPARATIONS ⁽¹⁾									
Male	77,486	61,486	57,111	24,668	55,454	71,578	17,426	39,353	327,926 ⁽³⁾
Female	73,365	43,749	48,727	109,039	214,269	78,178	16,421	42,107	553,523 ⁽⁴⁾
Total	150,851	105,235	105,838	133,707	269,723	149,756	33,847	81,460	881,449 ⁽⁵⁾
SEPARATIONS PER 1000 POPULATION									
Male	-	162.1	88.0	59.7	63.0	123.3	203.0	269.7	104.6
Female	-	121.2	78.8	265.7	246.6	137.9	174.3	231.2	178.5
Total	-	142.2	83.5	162.3	154.2	130.5	188.0	248.3	141.3
PATIENT DAYS ⁽¹⁾ SINCE ADMISSION									
Male	520,739	416,353	309,172	213,258	590,749	1,237,926	378,808	1,350,473	4,505,546 ⁽⁶⁾
Female	492,005	291,680	258,159	693,779	1,673,456	1,267,291	394,241	2,023,122	6,613,169 ⁽⁷⁾
Total	1,012,744	708,033	567,331	907,037	2,264,205	2,505,217	773,049	3,373,595	11,118,715 ⁽⁸⁾
DAYS SINCE ADMISSION PER 1000 POPULATION									
Male	-	1098.0	476.2	515.8	671.1	2132.1	4412.2	9255.5	1437.4
Female	-	808.0	417.5	1690.4	1926.2	2236.0	4184.8	11110.0	2132.2
Total	-	956.6	447.6	1101.0	1294.5	2183.4	4293.2	10285.0	1783.0
AVERAGE STAY OF SEPARATIONS ⁽¹⁾									
Male	6.7	6.8	5.4	8.6	10.7	17.3	21.7	34.3	13.7
Female	6.7	6.7	5.3	6.4	7.8	16.2	24.0	48.0	11.9
Total	6.7	6.7	5.4	6.8	8.4	16.7	22.8	41.4	12.6

(1) Based on "claims processed" during the year, and include Ontario residents hospitalized in other provinces.

(2) Excluding newborn.

(3) Includes 850, age unknown.

(4) Includes 1033, age unknown.

(5) Includes 1883, age unknown.

(6) Includes 8807, age unknown.

(7) Includes 11441, age unknown.

(8) Includes 20248, age unknown.

TABLE A14

HOSPITALIZATION BY AGE AND SEX, PROVINCIAL PLAN IN-PATIENTS⁽¹⁾, SASKATCHEWAN, 1961

	Newborn	0-4 ⁽²⁾	5-14	15-24	25-44	45-64	65-69	70+	Total Excluding Newborn
SEPARATIONS									
Male	12,042	14,206	11,964	6,389	11,192	15,475	4,680	15,189	79,095
Female	11,463	10,768	11,272	20,688	36,408	17,910	3,988	11,677	112,711
Total	23,505	24,974	23,236	27,077	47,600	33,385	8,668	26,866	191,806
SEPARATIONS PER 1000 POPULATION									
Male	-	243.5	116.3	96.2	95.5	177.2	307.0	472.7	164.9
Female	-	194.3	114.7	326.2	324.4	229.3	307.6	462.9	252.9
Total	-	219.5	115.5	208.5	207.5	201.8	307.3	468.4	207.3
PATIENT DAYS SINCE ADMISSION									
Male	81,653	111,280	67,708	46,034	94,606	190,176	72,428	271,745	853,977
Female	78,345	83,269	61,544	125,612	259,497	207,671	59,894	212,051	1,009,538
Total	159,998	194,549	129,252	171,646	354,103	397,847	132,322	483,796	1,863,515
DAYS SINCE ADMISSION PER 1000 POPULATION									
Male	-	1907.3	658.0	692.9	807.4	2177.7	4751.2	8456.6	1780.7
Female	-	1502.7	626.4	1980.4	2312.5	2658.4	4620.0	8405.4	2265.5
Total	-	1710.2	642.5	1321.8	1543.7	2404.7	4690.9	8434.1	2014.2
AVERAGE STAY OF SEPARATIONS									
Male	6.8	7.8	5.7	7.2	8.5	12.3	15.5	17.9	10.8
Female	6.8	7.8	5.5	6.1	7.1	11.6	15.0	18.2	9.0
Total	6.8	7.7	5.6	6.3	7.4	11.9	15.3	18.0	9.7

(1) Does not include 531 separations involving 113,946 patient days from geriatric hospitals at Regina, Saskatoon and Melford. But does include out-of-province hospitalization of residents covered by the hospital plan.

(2) Excluding newborn.

TABLE A14

HOSPITALIZATION BY AGE AND SEX, PROVINCIAL PLAN IN-PATIENTS⁽¹⁾, BRITISH COLUMBIA, 1961

	Newborn	0-4 ⁽¹⁾	5-14	15-24	25-44	45-65	65-69	70+	Total Excluding Newborn
SEPARATIONS									
Male	19,252	18,807	18,103	7,519	16,895	21,539	5,953	18,638	107,454
Female	18,437	14,239	15,421	30,770	57,283	24,109	5,003	13,934	160,759
Total	37,689	33,046	33,524	38,289	74,178	45,648	10,956	32,572	268,213
SEPARATIONS PER 1000 POPULATION									
Male	-	197.4	109.9	71.3	76.6	135.7	237.5	314.2	129.6
Female	-	155.6	97.9	300.5	263.2	161.1	194.8	250.9	201.0
Total	-	176.9	104.0	184.2	169.3	148.0	215.9	283.6	164.6
PATIENT DAYS ⁽³⁾ SINCE ADMISSION									
Male	139,654	145,413	105,525	60,052	154,899	286,319	105,285	366,566	1,224,059
Female	131,772	108,787	82,520	190,367	415,186	297,433	82,306	274,833	1,451,432
Total	271,426 ⁽²⁾	254,200	188,045	250,419	570,085	583,752	187,591	641,399	2,675,491
DAYS SINCE ADMISSION PER 1000 POPULATION									
Male	-	1526.0	640.5	569.3	702.6	1804.2	4200.0	6179.5	1476.4
Female	-	1188.9	523.7	1859.1	1908.0	1987.3	3204.6	4948.0	1814.3
Total	-	1360.9	583.4	1204.6	1301.3	1893.1	3696.2	5584.0	1642.3
AVERAGE STAY ⁽³⁾ OF SEPARATIONS									
Male	7.2	7.7	5.8	8.0	9.2	13.3	17.7	19.7	11.4
Female	7.1	7.6	5.4	6.2	7.2	12.3	16.4	19.7	9.0
Total	7.2	7.7	5.6	6.5	7.7	12.8	17.1	19.7	10.0

(1) With respect to rehabilitation and chronic patients, the British Columbia program covers only the active treatment portion of care, and does not cover the custodial portion of care.

(2) Excluding newborn.

(3) Excludes out-of-province hospitalization.

HOSPITALIZATION BY AGE AND SEX, IN-PATIENTS⁽¹⁾, YUKON, 1961

	Newborn	0-4 ⁽²⁾	5-14	15-24	25-44	45-64	65-69	70+	Total Excluding Newborn
SEPARATIONS									
Male	269	364	186	152	466	312	37	110	1,604 ⁽³⁾
Female	266	215	146	417	958	187	18	53	2,005 ⁽⁴⁾
Total	535	579	332	569	1,424	499	55	163	3,645 ⁽⁵⁾
SEPARATIONS PER 1000 POPULATION									
Male	—	298.9	124.9	149.2	158.0	259.1	366.3	555.6	200.5
Female	—	192.1	100.1	487.7	450.8	261.2	227.8	546.4	310.9
Total	—	247.8	112.6	303.6	280.6	259.9	305.1	552.5	249.2
PATIENT DAYS SINCE ADMISSION									
Male	2,050	3,098	1,434	1,459	4,025	3,810	456	1,191	16,354 ⁽⁶⁾
Female	1,753	2,124	1,029	2,957	6,386	2,154	200	1,113	16,077 ⁽⁷⁾
Total	3,803	5,222	2,463	4,416	10,411	5,964	656	3,104	32,431 ⁽⁸⁾
DAYS SINCE ADMISSION PER 1000 POPULATION									
Male	—	2543.5	963.1	1431.8	1364.9	3164.5	5414.9	10055.6	1999.8
Female	—	1898.1	705.3	3458.5	3005.2	3008.4	2531.6	11474.2	2492.6
Total	—	2234.5	835.5	2356.5	2051.8	3106.3	3644.4	10522.0	2217.0
AVERAGE STAY OF SEPARATIONS									
Male	7.6	8.5	7.7	9.6	8.6	12.2	12.3	18.1	10.0
Female	6.6	9.9	7.0	7.1	6.7	11.5	11.1	21.0	8.0
Total	7.1	9.0	7.4	7.8	7.3	12.0	11.9	19.0	8.9

(1) Includes those who are the responsibility of the Yukon Hospital Insurance Service as well as those not covered by the Yukon Hospital Insurance Service. Includes Yukon residents hospitalized in other provinces.

(2) Excluding newborn.

(3) Includes 13, age unknown.

(4) Includes 11, age unknown.

(5) Includes 24, age unknown.

(6) Includes 81, age unknown.

(7) Includes 114, age unknown.

(8) Includes 195, age unknown.

TABLE A14

HOSPITALIZATION BY AGE AND SEX, TERRITORIAL PLAN IN-PATIENTS⁽¹⁾, NORTHWEST TERRITORIES, 1961

	Newborn	0-4 ⁽²⁾	5-14	15-24	25-44	45-64	65-69	70+	Total Excluding Newborn
SEPARATIONS									
Male	415	829	317	223	408	270	47	89	2,187 ⁽³⁾
Female	397	699	286	660	1,123	236	25	47	3,084 ⁽⁴⁾
Total	812	1,528	603	883	1,531	506	72	136	5,271 ⁽⁵⁾
SEPARATIONS PER 1000 POPULATION									
Male	-	419.5	115.4	100.7	103.2	170.5	311.3	451.8	170.6
Female	-	365.2	110.4	383.1	418.7	231.1	229.4	343.1	303.1
Total	-	392.8	113.0	224.2	230.8	194.2	276.9	407.2	229.2
PATIENT DAYS SINCE ADMISSION									
Male	2,760	8,688	3,506	2,406	4,206	3,526	585	1,253	24,242 ⁽⁶⁾
Female	2,659	7,541	2,983	4,633	8,413	2,907	255	675	27,734 ⁽⁷⁾
Total	5,419	16,229	6,489	7,039	12,619	6,433	840	1,928	51,976 ⁽⁸⁾
DAYS SINCE ADMISSION PER 1000 POPULATION									
Male	-	4396.8	1276.3	1086.2	1064.3	2226.0	3874.2	6360.4	1890.7
Female	-	3939.9	1151.7	2688.9	3136.8	2847.2	2339.4	4927.0	2725.4
Total	-	4172.0	1215.9	1787.5	1902.2	2469.5	3230.8	5772.5	2260.0
AVERAGE STAY OF SEPARATIONS									
Male	6.7	10.5	11.1	10.8	10.3	13.1	12.4	14.1	11.1
Female	6.7	10.8	10.4	7.0	7.5	12.3	10.2	14.4	9.0
Total	6.7	10.6	10.8	8.0	8.2	12.7	11.7	14.2	9.9

(1) Includes out-of-territories hospitalization.

(2) Excluding newborn.

(3) Includes 4, age unknown.

(4) Includes 8, age unknown.

(5) Includes 12, age unknown and excludes 5 with sex not specified.

(6) Includes 72, age unknown.

(7) Includes 327, age unknown.

(8) Includes 399, age unknown.

TABLE A 15
HOSPITALIZATION BY RESIDENCE, PROVINCIAL PLAN IN-PATIENTS⁽¹⁾, NEWFOUNDLAND, 1961

Area of Residence	Population ⁽²⁾	Number of Separations	Separations Per 1000 Population	Patient Days Since Admission	Days Since Admission Per 1000 Population	Average Stay of Separations
A. Incorporated cities, towns and villages						
1. 100,000 and over	-	-	-	-	-	-
2. 10,000-99,999	88,818	10,258	115.5	120,534	1357.1	11.8
3. 1000 - 9,999	75,660	11,045	146.0	108,158	1429.5	9.8
4. Under 1000	8,612	3,375	391.9	35,159	4082.5	10.4
B. Unincorporated and rural areas						
	284,763	25,893	90.9	297,664	1045.3	11.5
Total	457,853	50,972 ⁽³⁾	111.3	565,178 ⁽⁴⁾	1234.4	11.0

(1) Adults and children only. Includes out-of-province hospitalization.

(2) Based on Census of Canada.

(3) Includes 401 separations with residence not specified.

(4) Includes 3,663 days of care with residence not specified.

TABLE A15

HOSPITALIZATION BY RESIDENCE, PUBLIC GENERAL HOSPITAL IN-PATIENTS⁽¹⁾, PRINCE EDWARD ISLAND, 1961

Area of Residence	Population ⁽²⁾	Number of Separations	Separations Per 1000 Population	Patient Days Since Admission	Days Since Admission Per 1000 Population	Average Stay of Separations
A. Incorporated cities, towns and villages						
1. 100,000 and over	--	--	--	--	--	--
2. 10,000 - 99,999	18,318	3,560	194.3	40,795	2227.0	11.5
3. 1000 - 9,999	15,591	2,235	143.3	23,359	1498.2	10.5
4. Under 1000	9,541	2,074	217.3	19,422	2035.6	9.4
B. Unincorporated and rural areas	61,179	8,040	131.4	83,719	1368.4	10.4
Total	104,629	15,909	152.1	167,295	1598.9	10.5

(1) Adults and children only. Includes both "Provincial Plan" patients and other patients not responsibility of Provincial Plan, but excludes non-residents of the Province. Also excludes out-of-province hospitalization of "Provincial Plan" patients.

(2) Based on Census of Canada.

TABLE A15

HOSPITALIZATION BY RESIDENCE, PROVINCIAL PLAN IN-PATIENTS⁽¹⁾, NEW BRUNSWICK, 1961

Area of Residence	Population ⁽²⁾	Number of Separations	Separations Per 1000 Population	Patient Days Since Admission	Days Since Admission Per 1000 Population	Average Stay of Separations
A. Incorporated cities, towns and villages						
1. 100,000 and over	-	-	-	-	-	-
2. 10,000-99,999	157,485	23,643	150.1	285,077	1810.2	12.1
3. 1000-9,999	70,033	17,265	246.5	154,530	2206.5	9.0
4. Under 1000	1,443	327	226.6	3,579	2480.2	10.9
B. Unincorporated and rural areas	368,975	55,476	150.3	523,953	1420.0	9.4
Total ⁽³⁾	597,936	96,711	161.7	967,139	1617.4	10.0

(1) Adults and children only. Includes out-of-province hospitalization.

(2) Based on Census of Canada.

(3) Does not agree exactly with Table A14 due to minor processing errors.

TABLE A15

HOSPITALIZATION BY RESIDENCE, PROVINCIAL PLAN IN-PATIENTS⁽¹⁾, ONTARIO, 1961

Area of Residence	Population	Number of Separations	Separations Per 1000 Population	Patient Days Since Admission	Days Since Admission Per 1000 Population	Average Stay of Separations
A. Incorporated & unincorporated cities, towns & villages (including municipalities essentially of an urban character) with population:						
1. Urbanized Townships	421,543	65,821	156.1	690,306	1638	10.5
2. 100,000 & over	2,630,135	329,964	125.5	4,681,484	1780	14.2
3. 50,000 - 99,999	192,101	31,982	166.5	378,093	1968	11.8
4. 15,000 - 49,999	686,555	124,927	182.0	1,531,166	2230	12.3
5. 2,000 - 14,999	662,918	117,974	178.0	1,401,156	2114	11.9
6. 1,000 - 1,999	159,735	29,732	186.1	345,414	2162	11.6
7. Under 1,000	135,510	24,848	183.4	306,074	2259	12.3
B. Unincorporated places & rural areas	1,347,595 ⁽²⁾	155,322 ⁽³⁾	115.2	1,775,577 ⁽⁴⁾	1318	11.4
Total	6,236,092	880,570	141.2	11,109,272	1781	12.6

(1) Adults and children only. Does not include out-of-province hospitalization.

(2) Includes 13,692 residents of Indian Reserves.

(3) Includes 3,653 "separations" of residents of Indian Reserves.

(4) Includes 39,130 patient-days of residents of Indian Reserves.

TABLE A15

HOSPITALIZATION BY RESIDENCE, PROVINCIAL PLAN IN-PATIENTS⁽¹⁾, SASKATCHEWAN, 1961

Area of Residence	Population ⁽²⁾	Number of Separations	Separations Per 1000 Population	Patient Days Since Admission	Days Since Admission Per 1000 Population	Average Stay of Separations
A. Incorporated cities, towns and villages						
1. 100,000 and over	112,141	17,761	159.4	197,124	1757.8	11.1
2. 10,000-99,999	176,316	29,862	169.4	329,834	1870.7	11.0
3. 1000-9,999	107,411	23,744	221.1	223,769	2083.3	9.4
4. Under 1000	131,616	36,496	277.3	361,753	2748.5	9.9
B. Unincorporated and rural areas	397,697	83,943	211.1	751,035	1888.5	8.9
Total	925,181	191,806	207.3	1,863,515	2014.2	9.7

(1) Adults and children only. Includes out-of-province hospitalization. Excludes patients in geriatric hospitals at Regina, Saskatoon and Melfort.

(2) Based on Census of Canada.

TABLE A15
HOSPITALIZATION BY RESIDENCE, PROVINCIAL PLAN IN-PATIENTS⁽¹⁾, BRITISH COLUMBIA, 1961

Area of Residence	Population ⁽²⁾	Number of Separations	Separations Per 1000 Population	Patient Days Since Admission	Days Since Admission Per 1000 Population	Average Stay of Separations
A. Incorporated cities, towns and villages⁽³⁾						
1. 100,000 and over	384,522	52,968	137.7	632,867	1645.8	11.9
2. 10,000-99,999	587,089	89,075	151.7	908,650	1547.7	10.2
3. 1000-9,999	163,123	32,576	199.7	285,190	1748.3	8.8
4. Under 1000	19,972	3,871	193.8	32,026	1603.5	8.3
B. Unincorporated and rural areas	474,376	89,723	189.1	816,758	1721.7	9.1
Total	1,629,082	268,213	164.6	2,675,491	1642.3	10.0

(1) Adults and children only. Excludes out-of-province hospitalization.

(2) Data supplied by British Columbia based on Census of Canada.

(3) Includes British Columbia district municipalities essentially of urban character.

TABLE A16
REVENUE FUND EXPENDITURES OF BUDGET REVIEW HOSPITALS, BY TYPE OF ACCOUNT, BY PROVINCE, 1961

PROVINCE	Number of Hospitals Reporting	Departmental Expense						Other Revenue Fund Expense	Total Revenue Fund Expense
		Salaries and Wages	Medical and Surgical Supplies	Drugs	Raw Food	Other Supplies and Expense	Total Departmental Expense		
Nfld.	27	5,784,717	359,532	617,370	1,233,879	1,980,858	9,976,356	526,730	10,503,086
P.E.I.	9	1,719,278	100,589	130,833	272,023	604,042	2,826,765	369,897	3,196,662
N.S.	47	14,495,640	865,383	1,028,528	1,971,525	5,003,918	23,364,994	1,546,394	24,911,388
N.B.	38	13,601,269	793,087	984,228	1,709,240	3,953,247	21,041,071	2,711,124	23,752,195
Que.	153	112,636,928	5,667,102	8,637,846	12,097,159	24,394,300	163,433,335	18,517,296	181,950,631
Ont.	209	172,524,902	8,340,186	10,472,973	15,030,428	34,654,012	241,022,501	17,858,411	258,880,912
Man.	79	23,927,569	1,104,189	1,681,782	2,084,324	4,666,008	33,463,872	2,280,418	35,774,290
Sask.	145	26,628,084	1,188,536	1,657,563	2,436,465	5,548,835	37,459,483	2,604,141	40,063,624
Alta.	114	33,099,092	1,698,917	2,091,224	3,675,128	6,322,382	46,886,743	4,791,517	51,678,260
B.C.	91	43,894,795	2,015,450	2,590,314	3,615,099	8,553,150	60,668,808	3,874,520	64,543,328
Yukon	2	91,348	2,675	9,430	17,912	34,337	155,702	10,069	165,771
N.W.T.	1	128,628	6,327	8,626	16,029	65,451	225,061	19,339	244,400
CANADA	915	448,532,250	22,141,973	29,910,717	44,159,211	95,780,540	640,524,691	55,109,856	695,634,547

TABLE A17

REVENUE FUND EXPENDITURES PER PATIENT-DAY⁽¹⁾ OF BUDGET REVIEW HOSPITALS,
BY TYPE OF ACCOUNT, BY PROVINCE, 1961

Province	Departmental Expense						Other Revenue Fund Expense	Total Revenue Fund Expense
	Salaries and Wages	Medical and Surgical Supplies	Drugs	Raw Food	Other Supplies and Expense	Total Departmental Expense		
Newfoundland	11.01	.68	1.18	2.35	3.77	19.00	1.00	20.00
Prince Edward Island	10.24	.60	.78	1.62	3.60	16.84	2.20	19.04
Nova Scotia	13.77	.82	.98	1.87	4.75	22.19	1.47	23.66
New Brunswick	13.58	.79	.98	1.71	3.95	21.01	2.71	23.72
Quebec	14.01	.71	1.07	1.51	3.03	20.33	2.30	22.63
Ontario	16.17	.78	.98	1.41	3.25	22.59	1.67	24.26
Manitoba	14.69	.68	1.03	1.28	2.86	20.54	1.40	21.94
Saskatchewan	14.08	.63	.88	1.29	2.93	19.81	1.37	21.18
Alberta	13.08	.67	.83	1.45	2.50	18.53	1.89	20.42
British Columbia	16.22	.74	.96	1.34	3.16	22.42	1.43	23.85
Yukon	16.22	.47	1.67	3.18	6.10	27.64	1.79	29.43
Northwest Territories	18.14	.89	1.21	2.26	9.22	31.72	2.73	34.45
CANADA	14.84	.73	.99	1.46	3.17	21.19	1.82	23.01

(1) Patient-days during year for adults and children.

TABLE A18
REVENUE FUND EXPENDITURES PER CAPITA⁽¹⁾ OF BUDGET REVIEW HOSPITALS,
BY TYPE OF ACCOUNT, BY PROVINCE, 1961

Province	Departmental Expense						Other Revenue Fund Expense	Total Revenue Fund Expense
	Salaries and Wages	Medical and Surgical Supplies	Drugs	Raw Food	Other Supplies and Expense	Total Departmental Expense		
Newfoundland	12.63	.79	1.35	2.69	4.33	21.79	1.15	22.94
Prince Edward Island	16.43	.96	1.25	2.60	5.77	27.02	3.53	30.55
Nova Scotia	19.67	1.17	1.39	2.68	6.79	31.70	2.10	33.80
New Brunswick	22.75	1.33	1.65	2.86	6.61	35.19	4.53	39.72
Quebec	21.42	1.08	1.64	2.30	4.64	31.08	3.52	34.60
Ontario	27.66	1.34	1.68	2.41	5.56	38.65	2.86	41.51
Manitoba	25.96	1.20	1.82	2.26	5.06	36.31	2.47	38.78
Saskatchewan	28.78	1.28	1.79	2.63	6.00	40.49	2.81	43.30
Alberta	24.85	1.27	1.57	2.76	4.75	35.20	3.60	38.80
British Columbia	26.94	1.24	1.59	2.22	5.25	37.24	2.38	39.62
Yukon	6.24	.18	.64	1.22	2.35	10.64	.69	11.33
Northwest Territories	5.59	.28	.37	.70	2.85	9.79	.84	10.63
CANADA	24.59	1.21	1.64	2.42	5.25	35.12	3.02	38.14

(1) Based on 1961 Census of Population, Dominion Bureau of Statistics.

TABLE A19
PERCENTAGE DISTRIBUTION OF REVENUE FUND EXPENDITURES OF BUDGET
REVIEW HOSPITALS BY TYPE OF ACCOUNT, BY PROVINCE, 1961

PROVINCE	Departmental Expense						Other Revenue Fund Expense	Total Revenue Fund Expense
	Salaries and Wages	Medical and Surgical Supplies	Drugs	Raw Food	Other Supplies and Expense	Total Departmental Expense		
Newfoundland	55.1	3.4	5.9	11.7	18.9	95.0	5.0	100.0
Prince Edward Island	53.8	3.1	4.1	8.5	18.9	88.4	11.6	100.0
Nova Scotia	58.2	3.5	4.1	7.9	20.1	93.8	6.2	100.0
New Brunswick	57.3	3.3	4.1	7.3	16.6	88.6	11.4	100.0
Quebec	61.9	3.1	4.7	6.6	13.4	89.8	10.2	100.0
Ontario	66.6	3.2	4.0	5.8	13.4	93.1	6.9	100.0
Manitoba	66.9	3.1	4.7	5.8	13.1	93.6	6.4	100.0
Saskatchewan	66.4	3.0	4.1	6.1	13.9	93.5	6.5	100.0
Alberta	64.0	3.3	4.0	7.1	12.2	90.7	9.3	100.0
British Columbia	68.0	3.1	4.0	5.6	13.3	94.0	6.0	100.0
Yukon	55.1	1.6	5.7	10.8	20.7	93.9	6.1	100.0
Northwest Territories	52.6	2.6	3.5	6.6	26.8	92.1	7.9	100.0
CANADA	64.5	3.2	4.3	6.3	13.8	92.1	7.9	100.0

ANNUAL REPORT

OF THE MINISTER OF NATIONAL HEALTH AND WELFARE

ON THE OPERATION OF

AGREEMENTS WITH THE PROVINCES

UNDER THE

HOSPITAL INSURANCE AND DIAGNOSTIC SERVICES ACT

FOR THE FISCAL YEAR ENDED

MARCH 31, 1964

INDEX

iii

PART I -	Relating to Fiscal Year 1963-1964	<u>Page</u>
1.	Amendments to Legislation and Agreements	2
2.	Advisory Committee on Hospital Insurance, Subcommittees and Working Parties	3
3.	Summary of Programs	6
	(a) In-Patient Services	6
	(b) Out-Patient Services	7
	(c) Methods of Provincial Financing	9
4.	Number of Insured Persons	11
5.	Formula for Federal Contributions	15
6.	Federal Payments	17
7.	Final Contributions for 1961	20
8.	Comparative Data with Previous Years	26
PART II -	Relating to Hospitalization Experience During Calendar Year 1962	
1.	Utilization and Bed Accommodation	32
	(a) Volume of Care	33
	(b) Bed Facilities	37
	(c) Budget Review Hospitals	41
	(d) Contract and Federal Hospitals	47
2.	Selected Data on Patient Characteristics	47
	(a) Age and Sex Incidence	47
	(b) Length of Stay Groupings	52
	(c) Hospital Morbidity	53
3.	Hospital Personnel	62
4.	Hospital Expenditures	64

INDEX OF TABLES

	<u>PART I</u>	<u>Page</u>
TABLE A	- Number of Insured Persons, by Province, on March 31, 1964	13
TABLE B	- Net Population of Canada as estimated by Dominion Statistician, by Province, and Percentage Increase over previous year, 1958 to 1963	14
TABLE C	- Summary of Payments Made by Canada, by Province, 1963-64 Fiscal Year	18
TABLE D	- Payments by Canada in Each Fiscal Year, by Province, July 1, 1958 to March 31, 1964	19
TABLE E	- Payments by Canada in Respect of each Calendar Year, by Province, July 1, 1958 to March 31, 1964	21
TABLE F	- Cost of In-Patient Services, 1961; Net Population 1961 Census; Total and 25% Per Capita Cost, 1961, by Province	22
TABLE G	- Contribution by Canada with Respect to In- Patient Services, 1961	23
TABLE H	- Contribution by Canada with Respect to Out-Patient Services, 1961	24
TABLE J	- Total Contributions and Final Payments Made by Canada, by Province, with Respect to 1961	25
TABLE K	- Cost of In-Patient Services by Province, 1961	27
TABLE L	- Per Capita Cost of In-Patient Services, and Percentage Increase Over Previous Year, by Province, 1958 to 1961	30
TABLE M	- Final Cost of In-Patient Services and Percentage Increase Over Previous Year by Province 1958 to 1961	31

PART II

Page

TABLE 1 -	Total Patient Days During Year, Adults and Children, in Reporting Hospitals Listed in Hospital Insurance Agreements, Number and Percentage Distribution by Responsibility for Payment, and Selected Rates per 1,000 Total and Insured Population, Canada, 1961 and 1962	34
TABLE 2 -	Total Patient Days During Year, Admissions, Separations and Average Length of Stay, Adults and Children, in Hospitals Listed in Hospital Insurance Agreements, Number and Rates per 1,000 Population, by Province, 1962	36
TABLE 3 -	Number of Hospitals Listed in Hospital Insurance Agreements, Number of Hospitals Reporting, Beds and Cribs Set up on December 31, and Rate per 1,000 Population in Participating Provinces, Canada, 1959-1962	38
TABLE 4 -	Total Patient Days During Year, Admissions During Year, and Beds Set up on December 31, per 1,000 Population, Adults and Children, in Hospitals Listed in Provincial Agreements, by Province, 1961 and 1962	39
TABLE 5 -	Number and Percentage Distribution of Listed Hospitals, Beds and Cribs Set up on December 31, and Patient Days During Year, Adults and Children, in Hospitals Listed in Hospital Insurance Agreements, by Status of Hospital, Canada, 1962	40
TABLE 6 -	Budget Review Hospitals: Number and Percentage Distribution of Beds and Cribs Set up by Type of Unit, Canada, December 31, 1962	42
TABLE 7 -	Budget Review Hospitals: Number and Percentage Distribution of Patient Days During Year, Beds and Cribs Set up on December 31, and Percentage Occupancy, by Type of Accommodation, Adults and Children, Canada, 1962	44

INDEX OF TABLES (Cont'd)Page

TABLE 8 -	Budget Review General Hospitals, Number of Beds and Cribs Set up on December 31, Average Length of Stay and Percentage Occupancy, by Bed-Size of Hospital, Canada, 1962	45
TABLE 9 -	Budget Review Chronic and Convalescent Hospitals: Number of Beds and Cribs Set up on December 31, Average Length of Stay and Percentage Occupancy, by Bed-Size of Hospital, Canada, 1962	46
TABLE 10 -	Contract and Federal Hospitals: Number and Percentage Distribution of Beds and Cribs Set up on December 31, by Type of Unit, Average Length of Stay, and Percentage Occupancy, Canada, 1962	48
TABLE 11 -	Hospitalization by Age and Sex for In-Patients Insured by Provincial Plans, in Ten Provinces and Two Territories, 1962	49
TABLE 12 -	Hospitalization by Primary Diagnosis According to the Canadian List of 98 Diagnoses, Adult and Child In-Patients Insured by Provincial Plans, Eight Provinces and Two Territories, 1962	54
TABLE 13 -	Number of Persons Employed Full-Time and Part-Time in Hospitals Listed in Hospital Insurance Agreements, by Province, as at December 31, 1961 and 1962	63
TABLE 14 -	Total Paid Hours of Work per Patient Day in Budget Review General Hospitals, by Province, 1959, 1960, 1961, 1962	65
TABLE 15 -	Total Paid Hours of Nursing and Other Personnel per Patient Day in Budget Review General Hospitals, by Province, 1959, 1960, 1961, 1962	66
TABLE 16 -	Revenue Fund Expenditures of Budget Review Hospitals, by Province, 1959-1962	67

INDEX OF TABLES (Cont'd)Page

TABLE 17 - Revenue Fund Expenditures of Budget Review Hospitals per Patient Day, by Province, 1959-1962	68
TABLE 18 - Revenue Fund Expenditures of Budget Review Hospitals per Capita, by Province, 1959-1962	70

APPENDIX TABLES

TABLE A1 - Insured Patient Days During Year, within Respective Provinces, Adults and Children, in Reporting Hospitals Listed in Hospital Insurance Agreements, Number and Rates per 1,000 Insured Population, by Province, 1959-1962	74
TABLE A2 - Total Patient Days During Year, Adults and Children, in Reporting Hospitals Listed in Hospital Insurance Agreements, Number and Percentage Distribution, by Responsibility for Payment, by Province, 1962	75
TABLE A3 - Total Patient Days During Year, Admissions, Separations and Average Length of Stay, Adults and Children, in Hospitals Listed in Hospital Insurance Agreements, Number and Rates per 1,000 Population, by Province, 1962	77
TABLE A4 - Number of Beds and Cribs Set up on December 31 in Hospitals Listed in Hospital Insurance Agreements and Rates per 1,000 Population, by Province, 1961 and 1962	78
TABLE A5 - Number of Hospitals and Other Facilities and Percentage Distribution of Hospitals Listed in Hospital Insurance Agreements, by Status of Hospital, by Province, December 31, 1962	79
TABLE A6 - Number and Percentage Distribution of Beds and Cribs Set up, on December 31, in Hospitals Listed in Hospital Insurance Agreements, by Status of Hospital and by Province, 1962	80

INDEX OF TABLES (Cont'd)

	<u>Page</u>
TABLE A7 - Number and Percentage Distribution of Patient Days During Year, Adults and Children, in Hospitals Listed in Hospital Insurance Agreements, by Status of Hospital and by Province, 1962	81
TABLE A8 - Budget Review Hospitals: Number and Percentage Distribution of Beds and Cribs Set up, by Type of Unit, by Province, 1962	82
TABLE A9 - Budget Review Hospitals: Number and Percentage Distribution of Patient Days During Year, Adults and Children, and Percentage Occupancy, by Type of Accommodation, by Province, 1962	83
TABLE A10 - Budget Review General Hospitals: Percentage Occupancy by Bed Size of Hospital and by Province, 1962	84
TABLE A11 - Budget Review General Hospitals: Average Length of Stay, Adults and Children, by Bed Size of Hospital and by Province, 1962	85
TABLE A12 - Budget Review Chronic and Convalescent Hospitals: Beds Set up on December 31, Average Length of Stay, and Percentage Occupancy, by Province, 1962	86
TABLE A13 - Contract and Federal Hospitals: Number of Beds and Cribs Set up on December 31, by Type of Unit, by Province, 1962.....	87
TABLE A14 - Contract and Federal Hospitals: Average Length of Stay and Percentage Occupancy by Province, 1962	88
TABLE A15 - Hospitalization by Age and Sex, Provincial Plan In-Patients,	
Newfoundland, 1962	89
Prince Edward Island, 1962	90
Nova Scotia, 1962	91

INDEX OF TABLES (Cont'd)

	<u>Page</u>
New Brunswick, 1962	92
Quebec, 1962	93
Ontario, 1962	94
Manitoba, 1962	95
Saskatchewan, 1962	96
Alberta, 1962	97
British Columbia, 1962	98
Yukon, 1962	99
Northwest Territories, 1962	100
 TABLE A16 - Separations by Length of Stay for both Sexes and all Ages, Provincial Plan In-Patients, by Province, 1962	 101
 TABLE A17 - Patient Days of Separations by Length of Stay, for both Sexes and all Ages, Provincial Plan In-Patients, by Province, 1962	 102
 TABLE A18 - Separation Rates per Thousand Population by Primary Diagnosis According to the Canadian List of 98 Diagnoses, Adult and Child In- Patients Insured by Provincial Plans, by Province, 1962	 103
 TABLE A19 - Percentage Distribution of Separations by Primary Diagnosis according to the Canadian List of 98 Diagnoses, Adult and Child In- Patients Insured by Provincial Plans, by Province, 1962	 109
 TABLE A20 - Days of Care of Separations per Thousand Population by Primary Diagnosis According to the Canadian List of 98 Diagnoses, Adult and Child In-Patients Insured by Provincial Plans, by Province, 1962	 115
 TABLE A21 - Percentage Distribution of Days of Separa- tions, by Primary Diagnosis According to the Canadian List of 98 Diagnoses, Adult and Child In-Patients Insured by Provincial Plans, by Province, 1962	 121
 TABLE A22 - Average Length of Stay of Separations by Primary Diagnosis According to the Canadian List of 98 Diagnoses, Adult and Child In- Patients Insured by Provincial Plans, by Province, 1962	 127

INDEX OF TABLES (Cont'd)

	<u>Page</u>
TABLE A23 - Revenue Fund Expenditures of Budget Review Hospitals, by Type of Account, by Province, 1962	133
TABLE A24 - Revenue Fund Expenditures per Patient Day of Budget Review Hospitals, by Type of Account, by Province, 1962	134
TABLE A25 - Revenue Fund Expenditures per Capita of Budget Review Hospitals, by Type of Account, by Province, 1962	135
TABLE A26 - Percentage Distribution of Revenue Fund Expenditures of Budget Review Hospitals, by Type of Account, by Province, 1962	136

ANNUAL REPORT
of the
MINISTER OF NATIONAL HEALTH AND WELFARE
on the operation of
Agreements with the Provinces
under the
Hospital Insurance and Diagnostic Services Act
for the fiscal year ended March 31, 1964

This is the sixth report to Parliament required to be made in accordance with Section 9 of the Hospital Insurance and Diagnostic Services Act and it is made with respect to the operation of the Agreements under the Act for the fiscal year ended March 31, 1964.

It should be noted that although this is the third report for a period during which all of the provinces and territories were participating in the hospital insurance program for the whole year under review, it is only the second report which contains statistical data relating to the experience of participating hospitals in all the provinces for a full calendar year. Thus, it is the first occasion on which statistical data for a given year may be compared with the statistical data of a previous year, on a strictly comparable basis.

In view of the fact that the present report concerning the operation of the Agreements with the provinces, including federal payments to the provinces, relates to a fiscal year, while the amounts of the payments to hospitals and hospital utilization data are based on the calendar year, the statistical data in this report will reflect these differences. Data concerning federal contributions, other than the final contribution for 1961, and including the number of insured persons, and set out in Part I of this report, relate to the fiscal period under review for the year ended March 31, 1964. Statistical data concerning hospital utilization and set out in Part II of this report, relate to the calendar year 1962.

Part I of this report describes the amendments made during the year under review to the federal-provincial Agreements under the Hospital Insurance and Diagnostic Services Act. These amendments have been made in accordance with changes in provincial laws or in provincial administrative arrangements as set out in the Schedules of the Agreements. The activities of the Advisory Committee on Hospital

Insurance and Diagnostic Services, its Subcommittees and Working Parties are described. As in previous years, a description is given of the provisions of provincial programs as in force at the end of the year under review. Figures are provided concerning the number of persons covered by the hospital insurance programs at the end of the year under review, and the increases in population since the inception of the program, is shown. It has also been felt that it would be helpful to include in this report, as in previous reports, an outline of the statutory basis for federal contributions and advance payments made to the provinces. The amounts of payments made to the provinces during the fiscal year under review, are shown and some comparative data are given with regard to final costs since the inception of the program.

Part II of this report contains statistical data derived from the Annual Return of Hospitals for 1962. As explained in previous reports, the Annual Return of Hospitals was designed for a dual purpose: to fulfill the requirements of the Statistics Act in relation to hospital statistics and administered by the Dominion Bureau of Statistics; and to implement the provincial undertakings embodied in the Agreements under the Hospital Insurance and Diagnostic Services Act and administered by the Department of National Health and Welfare.

PART I - Relating to Fiscal Year 1963-1964

1. Amendments to Legislation and Agreements

During the year under review there was only one amendment made in the federal legislation and this was in the form of an amendment to the Hospital Insurance Regulations. The amendment was made following a recommendation of the Advisory Committee on Hospital Insurance and Diagnostic Services which had set up a Working Party to examine and report on the matter of income from the activities of hospitals not directly related to patient care. The objective of the amendment was to provide hospitals with some measure of free funds derived from ancillary operations which are not financed under the general sharing arrangements. The provinces felt that by making some provision whereby certain income would be left at the disposal of hospitals, encouragement would be given to greater efficiency in administration, thus enabling the provincial authorities to control hospital budgets directly related to patient care with greater precision. The amendment to the Hospital Insurance Regulations was made after consultation with all the provinces, as required under the Hospital Insurance and Diagnostic Services Act, and applied to the operating costs of hospitals incurred on and after January 1, 1963.

There were not many significant changes in provincial legislation during the year under review. Amendments to the provincial Regulations affecting the amount of the premiums paid by residents in Saskatchewan and Ontario were made, although in the latter case the change did not take effect during the period under review. The Saskatchewan amendment had the effect of reducing the annual premium from January 1, 1964 to \$20.00 and \$40.00 for single and family subscribers, respectively. The Ontario amendment, which was made at the end of the fiscal year under review, provided for an increase in the monthly premium to come into force on October 1, 1964: \$3.25 and \$6.50 for single persons and families, respectively.

A number of changes were made in the Agreements with the provinces, the majority of which related to the list of participating hospitals. There were also a number of amendments relating to out-patient services provided to insured persons under provincial law. For the first time since the conclusion of the Agreement with Alberta in 1958, some out-patient services have been included in the federal-provincial Agreement with that province: out-patient services provided in and by the provincial cancer clinics and the provincial laboratories.

Insured out-patient services were expanded in Manitoba by the inclusion of the services administered and provided by the Manitoba Cancer Treatment and Research Foundation; the services of the Pre-School Development Clinic were also included as insured services.

The amendments relating to insured out-patient services in Saskatchewan, which were mentioned in last year's Report, were completed early in the fiscal year under review. The New Brunswick Agreement was also amended so as to expand the insured out-patient services in that province.

At the end of the fiscal year under review amendments to the Prince Edward Island Agreement were being completed to reflect the changes which had been made in the provincial law when the province altered its method of financing from a premium method to a program of universal coverage financed through general revenue.

2. Advisory Committee on Hospital Insurance and Diagnostic Services, its Subcommittees and Working Parties

In previous reports an outline was given of the background of the developments leading up to the establishment of the Advisory Committee on Hospital Insurance and Diagnostic Services. The development of close co-operation between the federal and provincial governments in matters relating to hospital insurance since before the inception of the

joint program in July 1958, was described. Mention was made of the federal-provincial Technical Conferences on Hospital Insurance held between December 1957 and April 1959, and attended by representatives of all the provincial governments. It will be recalled that the ever-increasing attendance at these Technical Conferences appeared to preclude the type of discussion considered essential and which could only be achieved in a body of considerably more modest dimensions. At the same time it was considered desirable to maintain the mechanism for the exchange of views between the federal and provincial governments which had been made possible by the Technical Conferences. It was in these circumstances, therefore, that the Advisory Committee on Hospital Insurance and Diagnostic Services was established.

Previous reports have described the work of the Advisory Committee consisting of representatives of all the provinces which is chaired by the Director of Health Services with the Principal Medical Officer, Health Insurance acting as co-chairman. The Deputy Minister of Health is an ex-officio member of the Committee as are the chairmen of the subcommittees.

The Committee set up three subcommittees to deal with specific subjects and the provinces were invited to name to the subcommittees persons of particular technical competence in the subcommittees field of work. The subcommittees which were appointed were: Subcommittee on Quality of Care, Research and Statistics; Subcommittee on Finance and Accounting; and Subcommittee on Residence and Uniformity of Benefits. In order to expedite work with regard to specific problems, the subcommittees set up working parties charged with specific tasks.

The Advisory Committee on Hospital Insurance and Diagnostic Services held three meetings during the year under review, on April 22 and 23, 1963; October 21 and 22, 1963; and January 30 and 31, 1964. Generally the Advisory Committee holds two meetings annually but a special meeting was held early in 1964 to deal exclusively with the question of hospital costs.

At the meeting of the Advisory Committee held in the spring of 1963, in addition to discussions relating to a wide variety of technical problems, two experts in the hospital field from the United States discussed the question of assessment of hospital bed and service needs. Mr. J. Thewlis of the United States Department of Health, Education and Welfare, having responsibilities in that country for the field operation of the national Hospital Construction program, discussed the problem of estimating hospital bed and service needs from a national point of view, and Dr. R. Rorem, Executive Director of the Hospital Plan Association of Allegheny County in Pittsburgh, Pennsylvania,

discussed the problem from a regional point of view.' It has been found to be of considerable benefit to the federal and provincial authorities in the field of hospital insurance, to have technical experts address the Advisory Committee from time to time.

The second meeting during the fiscal year, of the Advisory Committee on Hospital Insurance and Diagnostic Services, was held in Ottawa on October 21 and 22, 1963. In addition to receiving reports of the work of its subcommittees and working parties, and dealing with a considerable number of technical problems, it was unanimously agreed to convene a special meeting for the sole purpose of discussing the question of hospital costs. In accordance with this decision, the Advisory Committee convened in a special session on January 30 and 31, 1964. This meeting drew up a specific recommendation concerned with present and future costs of hospital services across Canada. The Committee's recommendation pointed out that it had considered such factors as the numbers and types of hospital beds; the services and levels of service in the hospital system; staffing patterns and salary scales; utilization and trends in utilization; efficiency in hospital administration and operation, with possible modification to improve functional efficiency and methods used to review hospital budgets. These matters were discussed in terms of essential services and with a view to assessing the impact of such essential services on present and future costs.

The only subcommittee meeting held during the year under review was that of the Subcommittee on Finance and Accounting which met on September 18 and 19, 1963.

Most of the working parties were active during the year. The Working Party on Hospital Standards, to which reference has been made in previous reports, met on June 18 and 19, 1963 and the Working Party on Operational Research held its second meeting on June 20 and 21, 1963.

Although the Working Party on Laboratory Units did not hold a formal meeting, the small continuing group under the chairmanship of Dr. M.O. Klotz, Chief Pathologist of the Ottawa Civic Hospital, met several times during the year and two of these meetings were held with representatives of the Canadian Association of Pathologists.

For the first time a meeting was held of a new Working Party on Radiological Units, which was established by the Advisory Committee with a view to devising a unit system on a standardized basis for use across the country. This meeting was attended by technical personnel and, in addition, the Canadian Association of Radiologists sent representatives.

For the first time since the inauguration of the Hospital Insurance and Diagnostic Services Program, a meeting was held on October 2 and 3, 1963 in Ottawa of the federal and provincial hospital nursing consultants. This meeting was attended by provincial representatives and was chaired by the Consultant in Hospital Nursing of Health Insurance. The purpose of the meeting was to provide an opportunity for these consultants to share information, knowledge and experience by discussing topics in nursing services that are of common interest. The meeting dealt with a wide range of topics. The consensus at the close of the meeting was that the interchange of views which had been made possible by the meeting was of great value to all those concerned with hospital nursing.

3. Summary of Provincial Programs

Because of the variation in programs provided by the provinces in accordance with agreements under the Hospital Insurance and Diagnostic Services Act, it has been the practice to include in this report a summary of provincial programs at the end of the fiscal year under review.

(a) In-Patient Services

Since it is a primary requisite for the signing of an agreement that a province provide, on uniform terms and conditions, the in-patient services specified in the federal law, all of the provinces have undertaken to provide the following as insured in-patient services:

- (i) accommodation and meals at the standard or public ward level,
- (ii) necessary nursing service,
- (iii) laboratory, radiological and other diagnostic procedures together with the necessary interpretations for the purpose of maintaining health, preventing disease and assisting in the diagnosis and treatment of any injury, illness or disability,
- (iv) drugs, biologicals and related preparations as provided in an agreement,
- (v) use of operating room, case room and anaesthetic facilities, including necessary equipment and supplies,
- (vi) routine surgical supplies,

- (vii) use of radiotherapy facilities where available,
 - (viii) use of physiotherapy facilities where available,
 - (ix) services rendered by persons who receive remuneration therefor from the hospital, and
 - (x) such other services as are specified in an agreement.
- (b) Out-Patient Services

While the federal law authorizes the Minister to enter into an agreement to make contributions towards the costs of the above services on an out-patient basis as well, the law is permissive in this regard and the provinces are free to choose which, if any, out-patient services they propose to provide as insured services. At the end of the fiscal year under review, the following was the situation with regard to insured out-patient services:

In the agreement with British Columbia, no out-patient services were listed at the request of the province. Nevertheless, emergency services and minor surgical procedures are included in the provincial program on payment of a \$2 charge. During the early years, Alberta did not provide any out-patient services under the joint federal-provincial program. However, during the year under review, the services provided in and by the provincial cancer clinics and provincial laboratories became insured out-patient services in accordance with the amendment to the agreement described above.

A common feature of out-patient services provided in most of the provinces, is the provision of a fairly broad range of services in the specific event of an accident. In Ontario, these are provided within a period of 24 hours after an accident (Ontario also provides follow-up care in fracture cases), while this period may be extended in Manitoba, Quebec, the Northwest Territories and the Yukon. In Nova Scotia and New Brunswick, emergency services are provided within a period of 48 hours of an accident, and follow-up care is included for a period of 90 days after an accident in New Brunswick.

The majority of provinces now provide considerably more out-patient services than they did when the programs started. The Northwest Territories provide certain diagnostic procedures and necessary interpretations.

In Saskatchewan insured out-patient services include the services provided by a hospital in the course of providing diagnostic or treatment services, to the extent that these can be provided. All radiological and laboratorial procedures and all physiotherapy and occupational procedures are also insured out-patient services to the extent that these can be provided by the participating hospitals.

Manitoba provides surgical procedures as designated; certain procedures related to medical rehabilitation and electro-shock therapy; and the services provided through and by the Manitoba Cancer Treatment and Research Foundation; and the services provided by the pre-school development clinic administered by the Childrens Hospital of Winnipeg.

Ontario provides certain medical and therapeutic procedures in cases where the procedure ordinarily would be carried out as an in-patient service, in specified hospitals. During the year under review it was announced that the province proposed to extend insured out-patient services to include services related to medical rehabilitation.

Quebec provides minor surgical procedures as specified from time to time, including necessary radiological and laboratory examinations which are directly related to these procedures, along with the examination of tissues together with the necessary interpretations. Quebec out-patient services also include psychiatric day care and night care in psychiatric departments of certain specified hospitals. In addition, electro-shock and insulin shock therapy are insured services when provided in psychiatric departments of general hospitals in the province.

In New Brunswick, hospital services and facilities when provided for diagnostic and treatment procedures as authorized from time to time, including the use of the operating room; the use of surgical equipment and supplies; drugs and related preparations; and laboratory, radiological and other diagnostic procedures together with the necessary interpretations; are all insured out-patient services. Laboratory procedures when referred by a physician are insured services where approved facilities are available. Physiotherapy facilities where available are also included as insured out-patient services.

Nova Scotia provides a wide range of out-patient services in addition to the emergency services in accident cases mentioned above. The services of the tumour clinic and laboratory tests from time to time specified by the Commission, together with

necessary interpretations, are insured. The province also includes as insured out-patient services all medically necessary diagnostic radiological examinations. In addition, treatment facilities where available are insured for radiotherapy and physiotherapy. Minor, medical and surgical procedures and the provision of blood including blood fractions, are also insured out-patient services.

Prince Edward Island provides laboratory and radiological procedures, as specified, including the use of radioactive isotopes; drugs, biologicals and related preparations for emergency diagnosis and treatment; and all of the other services prescribed as in-patient services in the federal Act.

In Newfoundland, selected diagnostic and treatment procedures are provided as insured out-patient services.

(c) Methods of Provincial Financing

Since the provinces were free to devise their own methods for financing the provincial share of costs, a variety of methods of financing has emerged. Five provinces initially used a premium method, but two of these subsequently switched to general revenue; one province levies a sales (hospital) tax while another levies a property tax. Other provinces finance their share of costs out of general revenue and, in some instances, a combination of methods is used.

The premium method is used in Saskatchewan, Manitoba and Ontario. It had been used in New Brunswick and Prince Edward Island but it was abolished in the former from January 1, 1961 and the latter from December 1, 1962.

The annual premium, or hospitalization tax as it is called, in Saskatchewan was \$17.50 for single persons and \$35.00 for families, but was increased to \$24 and \$48 respectively from January 1, 1961. From January 1st 1964, the premium was lowered to \$20.00 and \$40.00 for single persons and families respectively. The funds derived from the hospitalization tax are augmented by general revenue funds.

The Manitoba monthly premium which was \$2.05 for single persons and \$4.10 for families, was increased to \$3.00 and \$6.00 respectively in June 1960. From January 1962 it was reduced to \$2.00 and \$4.00; at the same time, a 6% charge on personal income tax and an extra 1% tax on taxable income of corporations, were

levied to provide for the provincial costs not covered by the premiums. A compulsory payroll deduction is applied for employed groups of three or more persons. Provision is also made to exempt from this group certain categories of persons for such reasons as temporary or part-time employment.

The Ontario monthly premium of \$2.10 for single persons and \$4.20 for families (which is to be increased to \$3.25 and \$6.50 as from October 1st, 1964), entitles insured persons in Ontario to insured services and, in addition, to services over and above those included in the agreement under the Hospital Insurance and Diagnostic Services Act. The provincial program in that province includes insured services in mental hospitals and tuberculosis sanatoria. There is a compulsory payroll deduction clause in the Ontario law in relation to establishments of fifteen or more employees including the employer. Unlike the majority of provinces, this category of residents is the only category with respect to whom insurance coverage is compulsory in the province, the program being available to all others on a voluntary basis.

In all the premium provinces, reduced premium rates are levied with respect to the families of armed services personnel and members of the Royal Canadian Mounted Police.

British Columbia finances the provincial share of costs out of the general revenue of the province (part of a provincial sales tax in British Columbia is paid into the general revenue fund for hospital insurance). A similar method of financing is used in Quebec, New Brunswick, Prince Edward Island, Newfoundland, the Yukon and the Northwest Territories. Both British Columbia and the Northwest Territories supplement this source of revenue by the levy of authorized charges discussed below. Alberta raises a portion of its share of costs from a mill rate levied on property, as well as levying an authorized charge.

When the Hospital Insurance and Diagnostic Services program came into operation in Nova Scotia, a three per cent hospital tax was also inaugurated and the funds derived from this sales tax are used to finance the provincial share of costs. The tax was increased to five per cent from January 1st, 1961.

Only three provinces have included in their Agreement, provisions for levying charges directly to patients for insured services. These deterrent or co-insurance charges, described in the law as authorized charges, are related to in-patient services in British Columbia, where a charge of \$1.00 per day of hospital care is

imposed; in Alberta, where the charge varies between \$1.50 and \$2.00 per day (\$1.00 per day for a newborn), depending upon the category of the hospital; and in the Northwest Territories where a charge of \$1.50 per day of hospital care is imposed. (The charge of \$2.00 referred to above in connection with the out-patient services in British Columbia, is not a part of the joint federal-provincial program.)

4. Number of Insured Persons

The methods for determining the number of insured persons in a province and outlined in the Agreements, differ from province to province, since the methods used by the provinces to finance the provincial share of costs have a direct bearing on the availability of an actual count of insured persons. In the three provinces which levy premiums, insured persons are registered and identification certificates are provided. However, even in these circumstances the methods of registration differ. In Ontario and Manitoba, registration is for single persons and for the family head, but no actual count of the number of dependents of the family head is made. In order, therefore, to calculate the average number of persons in the province who are eligible for an entitled to insured services, a number which is required in connection with the federal contribution to the provinces, an estimate of the average number of dependents in these two provinces is made by the Dominion Statistician. In Saskatchewan the registration method used by the province consists of a head count including dependents.

Coverage is automatic or compulsory in all provinces except Ontario where persons employed in an undertaking having a total of 15 or more employed persons are the only mandatory groups, coverage being voluntary for the remaining population, as mentioned above.

In provinces where no premiums are levied and where the provincial share of costs is paid out of general revenue, sales or property tax, no individual registration of insured persons is required and coverage is universal. Insofar as these provinces are concerned, provision was made in the Agreements for calculation of the number of insured persons on the basis of a population estimate for a given date in the year (June 1) as determined by the Dominion Statistician.

The Hospital Insurance Regulations define "population" to mean the population of Canada or of the province, as certified by the Dominion Statistician, and, calculated for a calendar year in which a census was taken, as the population of Canada or of the province as ascertained by the census; for other than a census year, the population of Canada or of the province on the 1st day of June in that year according to published original intercensal estimates of the Dominion Statistician.

There are certain categories of persons with respect to whom hospital services are provided under a statute other than the hospital insurance legislation, and who are, therefore, not entitled to insured services. For the most part, these consist of members of the Armed Forces and the Royal Canadian Mounted Police. In addition, inmates of federal penitentiaries are provided with hospital services by the federal government. In the Dominion Bureau of Statistics population estimates, therefore, the number of the members of the regular forces, members of the Royal Canadian Mounted Police and persons serving terms of imprisonment in a federal penitentiary, amounting to some .7% of the total population, are deducted so as to provide a "net" population figure for the purpose of calculating the eligible population.

Table A shows by province, the number of insured persons on March 31, 1963 as reported for purposes of advance payments; the advance estimate of net population as of June 1, 1964 as certified by the Dominion Statistician; and the percentage of insured persons to the total net population at the end of the fiscal year under review. It will be noted that in all but three provinces, all of the net population was entitled to insured services at the end of the year.

At the end of the year under review coverage was compulsory or automatic in all provinces with the exception of Ontario, as noted above. Nevertheless, in spite of the partially voluntary aspect of that program, 98.1% of the net population was insured at the end of the year under review.

The percentage of insured persons in Canada on March 31st 1964 to net population, has increased steadily since the inception of a hospital insurance plan. In the early years of the program the large increases were due to the increasing number of provinces participating in the joint program. However, since 1961, the increases represent increases in the number of persons covered in provinces already participating in the plan. The percentages of insured persons to net population at the end of each of the fiscal years since the inception of the program, are as follows:

March 31, 1959.	64.5%
March 31, 1960.	67.6%
March 31, 1961.	97.7%
March 31, 1962.	98.2%
March 31, 1963.	98.6%
March 31, 1964.	99.1%

Table B shows, by province, the net population of Canada as estimated by the Dominion Statistician and the percentage increase

TABLE A

NUMBER OF INSURED PERSONS, BY PROVINCE, ON MARCH 31, 1964

PROVINCE	Number of Insured Persons March 31, 1964	Advance Estimate Of Net Population June 1, 1964	Percentage of Persons Insured
Newfoundland	488,000	488,000	100
Prince Edward Island	107,000	107,000	100
Nova Scotia	754,000	754,000	100
New Brunswick	608,000	608,000	100
Quebec	5,556,000	5,556,000	100
Ontario	6,420,571	6,545,000	98.1
Manitoba	925,697	959,000	96.5
Saskatchewan	925,155	934,000	99.1
Alberta	1,419,000	1,419,000	100
British Columbia	1,724,000	1,724,000	100
Yukon	15,000	15,000	100
Northwest Territories	24,000	24,000	100
CANADA	18,966,423	19,133,000	99.1

TABLE B
NET POPULATION OF CANADA AS ESTIMATED BY DOMINION STATISTICIAN, BY PROVINCE,
AND PERCENTAGE INCREASE OVER PREVIOUS YEAR, 1958 TO 1963.

PROVINCE	1958		1959		1960		*1961		1962		1963	
	Population	%	Population	%	Population	%	Population	%	Population	%	Population	%
Newfoundland	436,000	2.8	448,000	2.8	457,000	2.0	456,265	-0.2	468,000	-2.6	479,000	2.4
Prince Edward Island	99,000	2.0	101,000	2.0	102,000	1.0	103,531	1.5	105,000	1.4	105,000	-
Nova Scotia	691,000	0.7	696,000	0.7	702,000	0.9	716,552	2.1	724,000	1.0	734,000	1.4
New Brunswick	571,000	2.1	583,000	2.1	593,000	1.7	590,015	-0.5	600,000	1.7	606,000	1.0
Quebec	4,866,000	2.3	4,980,000	2.3	5,087,000	2.1	5,240,328	3.0	5,346,000	2.0	5,450,000	1.9
Ontario	5,759,000	2.6	5,908,000	2.6	6,046,000	2.3	6,192,034	2.4	6,294,000	1.6	6,402,000	1.7
Manitoba	859,000	1.7	874,000	1.7	888,000	1.6	911,476	2.6	924,000	1.4	939,000	1.6
Saskatchewan	885,000	1.6	899,000	1.6	907,000	0.9	921,447	1.6	927,000	0.6	930,000	0.3
Alberta	1,190,000	3.5	1,232,000	3.5	1,272,000	3.2	1,320,844	3.8	1,358,000	2.8	1,393,000	2.6
British Columbia	1,530,000	1.7	1,556,000	1.7	1,594,000	2.4	1,615,707	1.4	1,645,000	1.8	1,681,000	2.2
Yukon	12,000	8.3	13,000	8.3	13,000	-	14,161	8.9	14,000	-1.1	15,000	7.1
Northwest Territories	20,000	-	20,000	-	21,000	5.0	22,264	6.0	24,000	7.8	24,000	-
CANADA	16,918,000	2.3	17,310,000	2.3	17,682,000	2.1	18,104,624	2.4	18,429,000	1.8	18,758,000	1.8

*Census year.

from year to year, from 1958 to 1963. It will be noted that the net population of Canada increased from 16,918,000 to 18,758,000 during these five years. The population increase, totalling 1,840,000 persons, represents a 10.9% increase.

On an annual basis, the increase for Canada has averaged slightly more than 2% and it will be noted that increases have been recorded in most years in individual provinces. The population shown for 1961 is the population based on the census of that year and it was in order to make certain adjustments in individual provinces that decreases were recorded in the net population figures for Newfoundland and New Brunswick. The slight decrease shown for the Yukon in 1962 was due to the rounding of the figure to the nearest thousand persons.

5. Formula For Federal Contributions

The amount of the federal contributions to the provinces is calculated on the basis of a formula contained in the Hospital Insurance and Diagnostic Services Act. It has been designed in such a way as to provide greater federal assistance to those provinces in which the per capita cost of hospital care is lower and to provide for an equitable federal contribution to the provinces, having regard to the considerable variation in the per capita costs between the provinces.

The federal contribution as set out in the Act, is the aggregate in the year of twenty-five per cent of the per capita cost of in-patient services in Canada, that is the national per capita cost, and twenty-five per cent of the per capita cost of in-patient services in the province less the amount of authorized charges, multiplied by the average for the year of the number of insured persons in the province.

The effect of this formula is that the high-cost provinces receive a lower percentage of their costs from the federal government than do the low-cost provinces. The inclusion in the formula of the national per capita cost, however, acts as a deterrent to the high-cost provinces, since the more provincial costs exceed the national costs, the lower the percentage of the costs the federal contribution will be.

Since the federal contribution is calculated on an annual basis, provision was made in the Hospital Insurance Regulations for advances on account of contributions, so that the provinces would not be required to wait a full year for reimbursement of the amounts which they are required to pay to hospitals on a continuing basis. In order to expedite the payment of advances and, at the same time, to forestall the likelihood of major financial adjustments after the end of the year, the formula which is used for the calculation of the advance, provides for a

small holdback of the amount due to the province. The formula for the advance, therefore, differs from the formula for the annual contribution in that twenty-three and one-half per cent of the per capita cost of in-patient services in Canada is paid (was twenty-two per cent prior to January 1, 1962 when it was altered in accordance with the amendment to the Hospital Insurance Regulations discussed in previous Reports) instead of twenty-five per cent provided for in the annual calculation, and the amount of the advance unlike the amount of the contribution itself, is calculated on the basis of provincial payments, which may or may not be shareable costs as defined in the law.

Since the amount of the federal payment is calculated on a formula which includes the per capita cost of hospital care in Canada, continuing studies are carried out to ensure that this figure maintains accuracy in an area where costs are subject to fluctuations. Changes in the national per capita cost are made, subject to the approval of Treasury Board, at varying intervals as the situation requires. The purpose of making periodic adjustments in the national per capita is to maintain realistic advance payments and to eliminate major adjustments in the calculations of the federal contribution.

The costs which are shareable by the federal government, are described in the federal legislation. The Act specifically excludes from shareable costs amounts expended on the capital cost of land, buildings or physical plant; on the payment of any capital debt or interest related to capital debt; on the payment of debt incurred prior to the coming into force of the agreement or on the interest related to such prior debt; or any provision for depreciation on the value of land, buildings or physical plant. The term "physical plant" is defined in the Regulations as excluding furniture and movable equipment, or non-movable equipment specially required for use in a hospital. Thus, these items are shareable.

In this connection, it should be noted that most of the capital items which are, by definition, excluded from shareable costs, such as the costs of construction and other matters pertaining to physical plant, are supported by the federal government through the National Health Grants program and particularly through the Hospital Construction grant.

Generally speaking, shareable costs are the operating costs of the hospital which have been approved by the provincial authority and which have been determined in accordance with recognized and generally accepted accounting principles and procedures. The operating costs of a hospital as defined in the Regulations, however, specifically exclude a number of items which, although provided in or in connection with the hospital, are not considered to be an integral part of the operation of the hospital.

The province is required to review and approve the costs of each hospital and these approved costs form the basis of the federal sharing formula.

6. Federal Payments

During the year under review, payments to the provinces consisted of the regular monthly advance payments on a current basis and the payment of the final contribution based on shareable costs for the calendar year 1961. For reasons similar to those described in the last Report, the Governor-in-Council authorized a special further advance on account of the contributions for the 1961 to some of the provinces in October 1963. The final payment of the federal contribution for 1961 was completed in March 1964.

Table C is the summary of payments by Canada to participating provinces during the fiscal year under review. It includes advance payments on contributions and the final adjusted contributions for 1961 to the provinces.

The total payments to the provinces for the year under review were \$368,701,269.94 as advance payments and \$23,542,965.41 as final adjusted payments making a total of \$392,244,235.35.

Table D shows the total payments by fiscal year, to participating provinces since the inception of the hospital insurance program on July 1, 1958, totalling almost one and one-half billion dollars. It should be recalled that in 1958-59, only five provinces (Newfoundland, Manitoba, Saskatchewan, Alberta and British Columbia) participated at the beginning of the program, while two additional provinces (Nova Scotia and Ontario) operated programs for three months only. These seven provinces were joined during the fiscal year 1959-60, by two other provinces which operated programs for only part of that fiscal year (New Brunswick from July 1 and Prince Edward Island from October 1). During the fiscal year 1960-61 the remaining provinces commenced to participate in the program (Northwest Territories, April 1, 1960; Yukon, July 1, 1960; and Quebec, January 1, 1961). The fiscal year 1961-62 was the first year during which all of the provinces were participating for the full fiscal year.

Factors which must be considered in connection with the payments shown in this Table are the increase in the number of hospital beds which are being made available to meet the needs of an increasing population; and increasing hospital costs due to readjustments in salaries and wages which form a substantial percentage of overall hospital expenditures.

TABLE C
SUMMARY OF PAYMENTS MADE BY CANADA, BY PROVINCE,
1963 - 1964 FISCAL YEAR

PROVINCE	Advanced Payments			Final Payments*	Total Payments
	In-Patient	Out-Patient	Total		
Newfoundland	\$ 7,755,043.57	\$ 441,132.90	\$ 8,196,176.47	\$ 528,733.41	\$ 8,724,909.88
Prince Edward Island	1,701,164.17	138,920.66	1,840,084.83	82,439.43	1,922,524.26
Nova Scotia	13,283,048.48	917,260.19	14,200,308.67	974,534.23	15,174,842.90
New Brunswick	11,759,656.08	218,266.10	11,977,922.18	633,415.73	12,611,337.91
Quebec	101,818,341.32	1,535,869.06	103,354,210.38	10,494,677.20	113,848,887.58
Ontario	128,582,306.93	2,364,557.27	130,946,864.20	5,092,912.67	136,039,776.87
Manitoba	18,265,632.11	432,125.56	18,697,757.67	967,206.11	19,664,963.78
Saskatchewan	18,848,836.68	1,527,197.13	20,376,033.81	936,050.24	21,312,084.05
Alberta	26,330,778.70	—	26,330,778.70	1,979,844.73	28,310,623.43
British Columbia	31,883,194.05	—	31,883,194.05	1,804,202.59	33,687,396.64
Yukon	326,954.90	3,030.16	329,985.06	19,458.28	349,443.34
Northwest Territories	557,377.95	10,575.97	567,953.92	29,490.79	597,444.71
CANADA	\$361,112,334.94	\$7,588,935.00	\$368,701,269.94	\$23,542,965.41	\$392,244,235.35

*Final payments for the 1961 calendar year.

TABLE D
PAYMENTS BY CANADA - IN EACH FISCAL YEAR, BY PROVINCE,
JULY 1, 1958 TO MARCH 31, 1964

PROVINCE	1958-59	1959-60	1960-61	1961-62	1962-63	1963-64	TOTAL
Newfoundland	\$ 2,857,886.84	\$ 4,707,692.94	\$ 5,094,934.21	\$ 6,258,287.26	\$ 7,472,463.28	\$ 8,724,909.88	\$ 35,116,174.41
Prince Edward Island	-	447,338.27	1,010,806.54	1,381,894.39	1,673,681.11	1,922,524.26	6,436,244.57
Nova Scotia	1,572,782.64	8,162,540.78	9,595,387.52	11,872,932.01	13,519,974.70	15,174,842.90	59,898,460.55
New Brunswick	-	4,575,374.90	7,914,412.71	9,546,774.26	10,894,711.87	12,611,337.91	45,542,611.65
Quebec	-	-	13,936,740.72	73,022,517.78	88,713,635.41	113,848,887.58	289,521,781.49
Ontario	13,140,213.12	71,892,833.66	84,484,271.86	104,498,880.55	122,103,382.61	136,039,776.87	532,159,358.67
Manitoba	7,148,534.97	11,324,466.35	13,048,916.19	15,245,924.23	17,348,934.08	19,664,963.78	83,781,739.60
Saskatchewan	8,430,441.93	13,378,379.43	14,453,463.99	15,953,810.19	18,278,458.50	21,312,084.05	91,806,638.09
Alberta	8,774,575.68	15,698,727.86	16,905,597.57	19,730,547.07	25,784,973.30	28,310,623.43	115,205,044.91
British Columbia	12,784,038.88	20,406,091.56	22,493,438.52	25,697,550.94	30,049,147.43	33,687,396.64	145,117,663.97
Yukon	-	-	168,683.75	296,036.35	310,267.36	349,443.34	1,124,430.80
Northwest Territories	-	-	261,849.89	377,941.52	523,148.02	597,444.71	1,760,384.14
CANADA	\$54,708,474.06	\$150,593,445.75	\$189,368,503.47	\$283,883,096.55	\$336,672,777.67	\$392,244,235.35	\$1,407,470,532.85

Table E shows the total contributions by province, by calendar year instead of by fiscal year as was shown in Table D. As explained earlier, hospital insurance contributions are calculated on the basis of the calendar year. It will be noted that the amounts shown for 1958, 1959, 1960 and 1961 represent both advance payments and final adjusted payments. The amounts shown for 1962 and 1963 represent advance payments only and the amounts shown for 1964 represent advance payments for the first three months of that calendar year ended March 31, 1964.

7. Final Contribution for 1961

The final contributions payable for 1961 and paid during the fiscal year under review were calculated on the basis of the formula set out in the Hospital Insurance and Diagnostic Services Act and described above. The per capita cost of in-patient services in 1961 is shown in Table F. It will be noted that the national per capita cost was \$31.97 and that in eight provinces the cost exceeded this national figure. As a result, in these provinces the federal contribution represented a percentage of less than 50%, whereas the provinces in which the per capita cost was less than the national, received contributions exceeding 50% of their costs.

Table G shows the total contribution for in-patient services in 1961 as calculated in the formula described above. The total contribution of over \$280 million was made to the provinces all of which were participating by the end of that calendar year.

Table H shows the amount of the federal contribution made for out-patient services in 1961. In this connection, it should be recalled that the scope of out-patient services varies very considerably from province to province. It is this variation which accounts for the fact that the out-patient contribution to Nova Scotia equalled more than one half that payable to Ontario although the population of Ontario is many times greater than this ratio. The scope of services in Nova Scotia however, is relatively broad, while the Ontario out-patient services are more limited. It is to be noted that the federal contribution towards the cost of out-patient services in a province is in the same proportion as the federal contribution for in-patient services in that province.

Table J shows the total contribution payable by Canada to participating provinces with respect to 1961, totalling more than 284 million dollars. It will be recalled, however, that advances had been made to the provinces in an amount exceeding 260 million dollars so that the final payments for 1961 total some 23 and one-half million dollars.

TABLE E
PAYMENTS BY CANADA - IN RESPECT OF EACH CALENDAR YEAR, BY PROVINCE,
JULY 1, 1958 TO MARCH 31, 1964

PROVINCE	Payments by Canada					Advances on Contributions			
	Total Contributions					1962	1963	1964	
	1958	1959	1960	1961	1962	1963	1964		
Newfoundland	\$ 1,990,135.23	\$ 4,788,013.82	\$ 5,603,586.29	\$ 6,185,656.98	\$ 6,737,187.55	\$ 7,604,757.91	\$ 2,206,836.63		
Prince Edward Island	-	235,524.49	1,116,640.33	1,285,697.50	1,550,148.17	1,804,102.12	444,131.96		
Nova Scotia	-	8,149,539.76	9,991,458.82	11,569,797.35	12,750,964.59	13,794,076.16	3,642,623.87		
New Brunswick	-	3,331,614.19	7,409,672.94	9,720,034.19	10,395,505.09	11,562,560.90	3,123,224.34		
Quebec	-	-	-	77,241,386.65	85,325,597.04	100,752,787.22	26,202,010.58		
Ontario	-	72,610,303.71	86,732,452.12	100,109,894.16	112,514,191.97	126,846,653.04	33,345,863.67		
Manitoba	4,779,865.66	11,556,009.75	13,229,363.97	15,053,607.08	16,263,890.65	18,210,554.41	4,688,448.08		
Saskatchewan	5,775,875.67	13,276,380.46	14,893,775.21	16,055,698.34	17,053,916.82	19,659,081.95	5,091,909.64		
Alberta	6,494,722.50	15,345,668.80	18,200,793.60	20,758,780.56	22,544,792.40	25,347,982.47	6,512,304.58		
British Columbia	8,609,463.00	20,033,811.20	23,309,699.60	26,075,248.99	27,848,722.58	31,145,507.94	8,095,210.66		
Yukon	-	-	124,314.31	288,978.79	315,257.35	294,785.63	101,094.72		
Northwest Territories	-	-	208,049.96	391,527.84	463,972.44	552,913.33	143,920.57		
CANADA	\$27,650,062.06	\$149,326,866.18	\$180,819,807.15	\$284,736,308.43	\$313,764,146.65	\$357,575,763.08	\$93,597,579.30		
CUMULATIVE TOTAL	\$27,650,062.06	\$176,976,928.24	\$357,796,735.39	\$642,533,043.82	\$956,297,190.47	\$1,313,872,953.55	\$1,407,470,532.85		

TABLE F

COST OF IN-PATIENT SERVICES, 1961; NET POPULATION 1961 CENSUS;
TOTAL AND 25% PER CAPITA COST, 1961, BY PROVINCE

PROVINCE	Cost of In-Patient Services 1961	Net Population 1961 Census	Per Capita Cost	
			Total	25%
			1961	
Newfoundland	\$ 8,912,638.46	456,265	\$19.5339	\$4.8835
Prince Edward Island	2,381,866.48	103,531	23.0063	5.7516
Nova Scotia	20,289,660.23	716,552	28.3157	7.0789
New Brunswick	19,306,832.90	590,015	32.7226	8.1807
Quebec	141,446,468.31	5,240,328	26.9919	6.7480
Ontario	216,933,851.00	6,192,034	35.0343	8.7586
Manitoba	30,525,227.07	911,476	33.4899	8.3725
Saskatchewan	35,763,267.00	921,447	38.8121	9.7030
Alberta	46,229,813.13	1,320,844	35.0002	8.7501
British Columbia	55,367,981.20	1,615,707	34.2686	8.5672
Yukon	696,724.90	14,161	49.2003	12.3001
Northwest Territories	902,103.37	22,264	40.5185	10.1296
CANADA	\$578,756,434.05	18,104,624	\$31.9673	\$7.9918

TABLE G
CONTRIBUTION BY CANADA WITH RESPECT TO IN-PATIENT SERVICES, 1961

PROVINCE	25% of National Per Capita	25% of Provincial Per Capita	Less 25% Per Capita Authorized Charges	Aggregate Per Capita Cost	Average Number of Insured Persons	In-Patient Contribution by Canada
Newfoundland	7.9918	4.8835	-	12.8753	456,265	5,874,548.75
Prince Edward Island	7.9918	5.7516	-	13.7434	86,979	1,195,387.19
Nova Scotia	7.9918	7.0789	-	15.0707	716,552	10,798,940.23
New Brunswick	7.9918	8.1807	-	16.1725	590,015	9,542,017.59
Quebec	7.9918	6,7480	-	14.7398	5,240,328	77,241,386.65
Ontario	7.9918	8.7586	-	16.7504	5,897,909	98,792,334.91
Manitoba	7.9918	8.3725	-	16.3643	907,665	14,853,302.36
Saskatchewan	7.9918	9.7030	-	17.6948	890,678	15,760,369.07
Alberta	7.9918	8.7501	1.0256	15.7163	1,320,844	20,758,780.56
British Columbia	7.9918	8.5672	.4204	16.1386	1,615,707	26,075,248.99
Yukon	7.9918	12.3001	-	20.2919	14,161	287,353.60
Northwest Territories	7.9918	10.1296	.6064	17.5150	22,264	389,953.96
TOTAL CONTRIBUTIONS BY CANADA FOR IN-PATIENT SERVICES, 1961						\$281,569,623.86

TABLE H

CONTRIBUTION BY CANADA WITH RESPECT TO OUT-PATIENT SERVICES, 1961

PROVINCE	In-Patient Contribution	In-Patient Cost Less Authorized Charges	Out-Patient Cost	Out-Patient Contribution
Newfoundland	\$ 5,874,548.75	\$ 8,912,638.46	\$ 472,001.39	\$ 311,108.23
Prince Edward Island	1,195,387.19	2,381,866.48	179,947.63	90,310.31
Nova Scotia	10,798,940.23	20,289,660.23	1,448,330.00	770,857.12
New Brunswick	9,542,017.59	19,306,832.90	360,189.73	178,016.60
Ontario	98,792,334.91	216,933,851.00	2,893,171.84	1,317,559.25
Manitoba	14,853,302.36	30,525,227.07	411,649.00	200,304.72
Saskatchewan	15,760,369.07	35,763,267.00	670,158.14	295,329.27
Yukon	287,353.60	696,724.90	3,940.47	1,625.19
Northwest Territories	389,953.96	848,103.37	3,423.00	1,573.88
			\$6,442,811.20	\$3,166,684.57

TABLE J

TOTAL CONTRIBUTIONS AND FINAL PAYMENTS MADE BY CANADA,
BY PROVINCE, WITH RESPECT TO 1961

Province	Contribution by Canada			Less: Regular Advances	Final Payments*
	In-Patient	Out-Patient	Total		
Newfoundland	\$ 5,874,548.75	\$ 311,108.23	\$ 6,185,656.98	\$ 5,656,923.57	\$ 528,733.41
Prince Edward Island	1,195,387.19	90,310.31	1,285,697.50	1,203,258.07	82,439.43
Nova Scotia	10,798,940.23	770,857.12	11,569,797.35	10,595,263.12	974,534.23
New Brunswick	9,542,017.59	178,016.60	9,720,034.19	9,086,618.46	633,415.73
Quebec	77,241,386.65	—	77,241,386.65	66,746,709.45	10,494,677.20
Ontario	98,792,334.91	1,317,559.25	100,109,894.16	95,016,981.49	5,092,912.67
Manitoba	14,853,302.36	200,304.72	15,053,607.08	14,086,400.97	967,206.11
Saskatchewan	15,760,369.07	295,329.27	16,055,698.34	15,119,648.10	936,050.24
Alberta	20,758,780.56	—	20,758,780.56	18,778,935.83	1,979,844.73
British Columbia	26,075,248.99	—	26,075,248.99	24,271,046.40	1,804,202.59
Yukon	287,353.60	1,625.19	288,978.79	269,520.51	19,458.28
Northwest Territories	389,953.96	1,573.88	391,527.84	362,037.05	29,490.79
CANADA	\$281,569,623.86	\$3,166,684.57	\$284,736,308.43	\$261,193,343.02	\$23,542,965.41

*Including special advances.

Table K sets out the details of the cost of in-patient services in 1961 in each of the provinces. It will be noted that the provincial costs shown on the last line of this table are the final in-patient costs reported in Table "F". This table shows the amounts included or deducted in computing the in-patient costs.

The amounts shown for room differentials in the offset income section amount to 50% of the net earnings of the hospitals from charges for private and semi-private accommodation over and above standard ward rates. In some provinces the remaining 50% of this income is left with the hospitals, while in others, varying methods are applied. In Newfoundland, Nova Scotia, Ontario and Saskatchewan the full 50% is left with the hospitals; in Quebec and British Columbia 40% is left; in New Brunswick 25%; in Manitoba 20%; while in Prince Edward Island and Alberta the hospitals do not retain any of this income.

The provincial payments to federally-owned hospitals are shown in paragraph 2 of Table K. These are payments for insured in-patient services rendered to insured persons in hospitals operated by the Departments of Veterans Affairs, National Defence and National Health and Welfare.

When insured services are furnished to a person in respect of an injury or disability, where such person is legally entitled to recover the cost of such services from some other person by way of damages, the hospital account is paid by the provincial authority, and action is then taken to recover the cost from the responsible third party. The amounts so recovered in respect of insured in-patient services are shown on the second last line of Table K.

8. Comparative Data

It has been explained previously that essential parts of the formula for the payment of contributions to the provinces, is the per capita cost of in-patient services in the provinces, and the per capita cost of in-patient services in Canada. For the final calculation of the federal contribution, these per capita costs are based on actual shareable costs as defined in the Hospital Insurance Regulations. With the payment during the fiscal year under review, of the final contribution for the calendar year 1961, it is possible to begin to make comparisons with the amounts of the final contributions for previous years as set out in earlier reports to Parliament. It will be recalled that when the final contribution for the calendar year 1960 was reviewed in the last report, it was explained that during that calendar year Quebec had not yet participated in the joint program and that the two territories had participated for only part of the calendar year. Similarly, it had

TABLE K
COST OF IN-PATIENT SERVICES BY PROVINCE, 1961

	Newfoundland	Prince Edward Island	Nova Scotia	New Brunswick	Quebec	Ontario
1. Hospitals listed in Part I of Schedule "A":						
Operating Expenses	\$10,522,483.52	\$3,321,544.84	\$24,863,176.14	\$23,599,546.70	\$181,175,873.22	\$259,837,940.00
Less:						
Depreciation and Interest	499,881.60	240,414.27	961,862.84	2,657,264.75	11,764,281.72	10,504,678.00
Direct Costs of Research, Ambulance and O.P.D.	107,951.17	-	119,107.26	45,900.57	2,634,843.76	3,095,302.00
Unapproved Expenses	53,278.88	100,823.69	504,372.75	55,537.56	2,428,633.41	1,744,227.00
Offset Income:						
Federal Government	80,199.25	69,809.85	89,874.87	48,546.19	130,036.47	745,283.00
Workmen's Compensation	158,751.45	23,177.10	316,277.10	395,909.09	1,719,059.54	4,603,437.00
Non-Residents	41,209.25	44,395.25	288,047.12	601,261.07	1,736,501.04	2,734,227.00
Care Deemed Unnecessary	8,138.00	32,188.20	49,391.50	206.80	179,060.52	101,601.00
Room Differential	128,802.30	64,070.00	586,485.06	608,350.50	8,841,884.94	8,438,547.00
Non-Benefit Drugs	-	-	484.77	-	21,433.77	6,452.00
Out-Patient Services	757,972.35	200,844.87	1,671,994.06	899,501.31	9,703,055.59	12,737,649.00
Recoveries and Sales	717,775.26	195,825.83	1,236,444.52	1,324,370.03	6,832,749.38	10,313,301.00
Other Income	156,517.62	126,090.73	117,405.44	37,370.17	3,676,230.71	2,195,008.00
Total Deductions	2,710,477.13	1,097,639.79	5,941,747.29	6,674,218.04	49,667,770.85	57,219,712.00
Net Operating Costs	7,812,006.39	2,223,905.05	18,921,428.85	16,925,328.66	131,508,102.37	202,618,228.00
2. Provincial Payments:						
Equipment	389,636.17	-	194,430.75	1,186,647.67	-	-
Contract Hospitals	468,904.91	16,543.48	144,111.15	55,454.80	5,723,866.50	7,712,336.00
Federal Hospitals	48,650.00	-	848,593.40	641,876.98	2,382,946.00	5,244,819.00
Out-of-Province Care	226,672.30	144,685.26	265,229.90	534,785.73	1,894,325.24	2,373,080.00
3. Authorized Charges:						
Contract Hospitals	-	-	-	-	-	-
Federal Hospitals	-	-	-	-	-	-
4. Sub-Total	8,945,869.77	2,385,133.79	20,373,794.05	19,344,093.84	141,509,240.11	217,948,463.00
5. Amounts Recovered	33,231.31	3,267.31	84,133.82	37,260.94	62,771.80	1,014,612.00
6. Cost of In-Patient Services (Agrees with Table F)	\$8,912,638.46	\$2,381,866.48	\$20,289,660.23	\$19,306,832.90	\$141,446,468.31	\$216,933,851.00

TABLE K (Cont'd)

	Manitoba	Saskatchewan	Alberta	British Columbia	Yukon	Northwest Territories
1. Hospitals Listed in Part I of Schedule "A":						
Operating Expenses	\$35,945,547.07	\$43,265,880.29	\$52,652,135.45	\$63,688,944.61	\$166,326.34	\$244,399.32
Less						
Depreciation and Interest	1,506,832.00	1,626,667.97	4,218,915.91	3,448,126.48	10,068.76	19,338.67
Direct Costs of Research, Ambulance and O.P.D.	682,035.00	2,547.58	168,254.28	316,509.69	-	-
Unapproved Expenses	502,285.00	1,153,972.36	1,526,722.16	769,487.82	121.92	234.95
Offset Income:						
Federal Government	62,015.00	393,676.45	460,644.58	112,988.84	943.00	3,500.50
Workmen's Compensation	406,811.00	515,266.57	1,032,510.50	1,368,742.98	6,578.00	11,516.50
Non-Residents	1,025,706.00	528,759.77	759,853.82	435,094.83	3,042.00	3,981.17
Care Deemed Unnecessary	31,826.00	9,313.72	22,474.00	267,531.48	161.00	4,327.50
Room Differential	610,292.00	349,092.19	896,681.89	980,511.70	211.50	-
Non-Benefit Drugs	-	561,840.46	23,581.35	84,315.94	-	-
Out-Patient Services	855,058.00	1,717,236.37	2,023,126.97	2,475,179.80	13,042.76	16,100.90
Recoveries and Sales	1,634,707.00	1,276,198.84	1,838,543.30	2,308,327.60	10,028.53	5,697.83
Other Income	307,457.00	490,231.20	369,710.75	498,042.86	1,450.50	-
Total Deductions	7,625,024.00	8,624,803.48	13,341,019.51	13,064,860.02	45,647.97	64,698.02
Net Operating Costs	28,320,523.07	34,641,076.81	39,311,115.94	50,624,084.59	120,678.37	179,701.30
2. Provincial Payments:						
Equipment	-	49,543.64	2,427,768.05	1,025,970.81	55.80	15,581.91
Contract Hospitals	324,988.00	171,950.29	2,016,475.89	369,236.68	340.58	158,506.87
Federal Hospitals	1,435,091.00	268,284.28	1,251,774.40	2,915,716.45	487,208.00	222,823.50
Out-of-Province Care	519,552.00	688,062.88	564,674.78	470,746.02	88,442.15	282,486.79
3. Authorized Charges:						
Contract Hospitals	-	-	577,099.40	13,217.00	-	25,585.50
Federal Hospitals	-	-	221,171.90	155,694.00	-	17,928.00
4. Sub-Total	30,600,154.07	35,818,917.90	46,370,080.36	55,574,665.55	696,724.90	902,613.87
5. Amounts Recovered	74,927.00	55,650.90	140,267.23	206,684.35	-	510.50
6. Cost of In-Patient Services (Agrees with Table F)	\$30,525,227.07	\$35,763,267.00	\$46,229,813.13	\$55,367,981.20	\$696,724.90	\$902,103.37

been explained in an earlier report in connection with the final contribution for the calendar year 1959, that only seven provinces had participated in the joint program for the whole of the calendar year, Nova Scotia and Ontario having commenced on January 1, 1959. Insofar as the calendar year 1958 was concerned, only the original five provinces were participating, (Newfoundland, Manitoba, Saskatchewan, Alberta and British Columbia) and these joint programs only commenced on July 1st of that year.

These facts should be kept in mind when reviewing the data presented in the two Tables L and M.

Table L shows the per capita cost of in-patient services and the percentage increase of these per capita costs over the previous year, by province, for the calendar years from 1958 to 1961 inclusive. The per capita costs shown for 1961, are based without exception on the shareable in-patient costs in all provinces, and show a national per capita cost of \$31.97. This represents an increase of 12.9% over the national per capita cost for 1960 which was \$28.31. This cost, in turn, represented an increase of 14.9% over the per capita cost for 1959 which was \$24.65.

It should be noted that although the national per capita cost increased from year to year, the percentage of the increase from one year to another, was on a diminishing basis.

Table M shows the final cost of in-patient services for the calendar years from 1958 to 1961 inclusive, by province, and it also shows the percentage increase over the previous year for each cost figure. The amounts shown for the calendar year 1961 were, in all instances, the actual shareable costs as defined in the Hospital Insurance Regulations and the total amount of some \$579 million represented an increase of 15.6% over the amount shown as the final cost for 1960. The final cost for 1960, which amounted to more than \$500 million, was 17.3% more than the final cost in 1959.

It will be noted that the percentage increases from year to year of the final costs of in-patient services, also appear to show a downward trend from year to year. However, it must be kept in mind that the actual amounts paid for in-patient services reflect, among other things, an increasing population. This increase in population is not reflected in the per capita figures shown in Table L.

TABLE L

PER CAPITA COST OF IN-PATIENT SERVICES, AND PERCENTAGE INCREASE
OVER PREVIOUS YEAR, BY PROVINCE, 1958 TO 1961

PROVINCE	1958		1959		1960		1961	
	Cost	Increase	Cost	Increase	Cost	Increase	Cost	Increase
Newfoundland	\$13.7603	18.5	\$16.3039		\$18.4199	13.0	\$19.5339	6.0
Prince Edward Island	15.2249	2.9	15.6719		19.2321	22.7	23.0063	19.6
Nova Scotia	17.2940	19.7	20.6938		25.1681	21.6	28.3157	12.5
New Brunswick	16.4678	29.0	21.2408		27.4360	29.2	32.7226	19.3
Quebec	17.6582	6.1	18.7399		21.3643	14.0	26.9919	26.3
Ontario	22.0245	24.6	27.4516		31.8345	16.0	35.0343	10.1
Manitoba	22.8411	21.9	27.8516		31.1363	11.8	33.4899	7.6
Saskatchewan	32.0523	8.3	34.7216		37.3806	7.7	38.8121	3.8
Alberta	25.6619	12.4	28.8487		32.9063	14.1	35.0002	6.4
British Columbia	25.2616	12.2	28.3514		31.7386	11.9	34.2686	8.0
Yukon	13.0843	-33.5	8.7075		47.9502	295.2	49.2003	2.6
Northwest Territories					26.4408	308.0	40.5183	53.2
CANADA	\$21.2329	16.1	\$24.6495		\$28.3140	14.9	\$31.9673	12.9

TABLE M

FINAL COST OF IN-PATIENT SERVICES AND PERCENTAGE INCREASE
OVER PREVIOUS YEAR BY PROVINCE 1958 TO 1961

PROVINCE	1958		1959		1960		1961	
	Final Cost	Percent- age Increase	Final Cost	Percent- age Increase	Final Cost	Percent- age Increase	Final Cost	Percent- age Increase
Newfoundland	\$ 5,999,505.48	21.7	\$ 7,304,160.36	21.7	\$ 8,417,909.69	15.2	\$ 8,912,638.46	5.9
Prince Edward Island	1,507,266.00*	5.0	1,582,861.00	5.0	1,961,669.26	23.9	2,381,866.48	21.4
Nova Scotia	11,950,175.00*	20.5	14,402,853.40	20.5	17,668,032.81	22.7	20,289,660.23	14.8
New Brunswick	9,403,103.00*	31.7	12,383,380.45	31.7	16,269,527.62	31.4	19,306,832.90	18.7
Quebec	85,924,996.00*	8.6	93,324,876.00*	8.6	108,680,320.00*	16.5	141,446,468.31	30.1
Ontario	126,839,227.00*	27.9	162,184,056.06	27.9	192,471,252.07	18.7	216,933,851.00	12.7
Manitoba	19,620,464.00	24.1	24,342,268.00	24.1	27,649,032.00	13.6	30,525,227.07	10.4
Saskatchewan	28,366,242.83	10.0	31,214,755.68	10.0	33,904,161.33	8.6	35,763,267.00	5.5
Alberta	30,537,627.70	16.4	35,541,554.53	16.4	41,856,756.05	17.8	46,229,813.13	10.4
British Columbia	38,650,193.85	14.1	44,114,706.55	14.1	50,591,381.71	14.7	55,367,981.20	9.4
Yukon	418,696.00*	-31.4	287,346.00*	-31.4	623,352.55	310.2	696,724.90	11.8
Northwest Territories					555,255.80		902,103.37	62.5
CANADA	\$359,217,496.86	18.8	\$426,682,818.03	18.8	\$500,648,650.89	17.3	\$578,756,434.05	15.6

*Estimated for non-participating province

PART II

This part of the report contains a review of some of the main features of the hospital experience under the Hospital Insurance program for the year 1962 and for prior years. It includes information on hospital utilization and bed facilities, selected data on age, sex, and diagnostic characteristics of in-patients, numerical counts of hospital personnel, and a summary of hospital expenditures. The overall picture for Canada as a whole is contained mainly in the tables of the main body of the report, while more detailed information on province by province experience, is shown in the tables in the Appendix.

As explained in previous reports to Parliament, much of the statistical data is derived from the Annual Return of Hospitals. The Return consists of two main parts, the first relating to facilities and services and the second relating to finances. The first part is divided into six main segments: classification of hospital; beds; utilization data; departmental services; personnel; and training facilities. The second part consists of details relating to the revenue fund; the plant fund; the endowment fund; and also requires certification by the provincial authority and the hospital auditor.

The statistical data compiled from the Annual Returns pertain to hospitals which are listed in federal-provincial Agreements under the Hospital Insurance and Diagnostic Services Act, and which are classified as "budget review", "contract", or "federal". Most hospitals are in the category of "budget review" hospitals, since public hospital must be listed by the province on the basis of a budget review system. A "contract" hospital is defined in the Hospital Insurance Regulations as a private or industrial hospital with which the province has contracted for the provision of insured services. The category of hospital which is described as "federal" is defined as a hospital which is owned or operated by the Government of Canada.

1. Utilization and Bed Accommodation

The following tables include a number which deal with the overall picture for all classes of facilities participating in the insurance program, and others which highlight some of the more detailed information in relation to budget review hospitals (subdivided as general, allied special, acute or chronic-convalescent) contract and federal hospitals. Among the elements of patient movement reviewed in this section are days of care in hospital, admissions, separations from hospital and average length of stay; consideration is given also to types of hospital beds and

the occupancy of these beds. The total population figures used for the development of rates and ratios are the 1962 intercensal estimates, the 1961 Census of Canada and the revised intercensal estimates for 1959 and 1960 prepared by the Dominion Bureau of Statistics. In instances where the insured population is used, the figures refer to the annual average number of insured persons under provincial plans approved for purposes of final payment of shareable costs in 1959, 1960 and 1961, and for advance payments in 1962.

(a) Volume of Care

The aggregate volume of insured in-patient care in listed hospitals⁽¹⁾ increased by 4.7 per cent in 1962 over the previous year, while the total insured population increased by 2.3 per cent. Table 1 records an increase from 31,247,844 insured patient days of adults and children in 1961, to 32,702,237 insured days in 1962, the figures excluding a few hospitals that did not submit complete statistical returns. Expressed in relation to population, the reported insured volume of care per thousand and insured persons (which excludes out-of-province hospitalization of beneficiaries) was about 1760 days in 1961 and 1800 days in 1962. Reference may be made to Table A1 for consideration of trends in the insured volume of care rate in particular provinces, and to variations among them in the volume of care provided. As indicated in Table A1, Saskatchewan and Alberta each continued to have the highest insured volume of care rates in 1962, with Alberta up from the previous year to 2,271 days per thousand population and Saskatchewan down from the previous year to 2,199 days per thousand population. Next in line among the provinces in 1962 were Ontario with 1,915 days, Manitoba with 1,862 days and Prince Edward Island with 1,762 days per thousand population, each being somewhat higher than the previous year. Among the remaining provinces, British Columbia remained about the same at 1,673 days, New Brunswick gained slightly to 1,672 days, Quebec advance sharply to 1,625 days, and Nova Scotia with 1,493 and Newfoundland with 1,194 days both represented an increase over the previous year.

Table 1 shows also the relationship of insured patient days of beneficiaries hospitalized in the home province to all patient days supplied throughout Canada in reporting hospitals in 1961 and 1962. According to this table, insured days accounted for 87.8 per cent of all patient days in 1961 and 89.2 per cent in 1962. However, if

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- (1) Provincial Plan days of adults and children within a province in hospitals listed in federal-provincial Hospital Insurance Agreements, excluding out-of-province hospitalization of residents of a province.

TABLE 1

TOTAL PATIENT DAYS DURING YEAR, ADULTS AND CHILDREN, IN REPORTING HOSPITALS LISTED IN HOSPITAL INSURANCE AGREEMENTS, NUMBER AND PERCENTAGE DISTRIBUTION BY RESPONSIBILITY FOR PAYMENT, AND SELECTED RATES PER 1000 TOTAL AND INSURED POPULATION, CANADA, 1961 AND 1962

Responsibility for Payment	1961		1962	
	Number of Days	Percent of Total	Number of Days	Percent of Total
Provincial Plan ⁽¹⁾	31,247,844	87.8	32,725,162	89.2
Insured Residents Care Not Responsibility of Provincial Plan	145,998	0.4	288,042	0.8
Non-Insured Residents of Province	301,748	0.8	237,529	0.6
Non-Residents of Province	472,450	1.3	530,364	1.4
Workmen's Compensation Boards	584,703	1.6	577,328	1.6
Federal Government	2,226,079	6.3	1,951,432	5.3
Undistributed Days	620,495	1.7	392,754	1.1
Total Patient Days	35,599,317	100.0	36,702,611	100.0
Total Population ⁽²⁾	18,238,247		18,570,000	
Total Patient Days Per 1,000 Total Population	1,951.9		1,976.4	
Insured Population ⁽³⁾	17,759,367		18,172,717	
Total Provincial Plan Days Per 1,000 Insured Population	1,759.5		1,800.8	

(1) Excludes out-of-province insured hospital care.

(2) Based on Census of Canada and Revised Intercensal Population Estimates as at June 1, Dominion Bureau of Statistics.

(3) Based on annual average number of insured persons under Provincial Plan, 1961 final figures, 1962 estimates.

Source: Tables A1 and A2.

consideration is given to the 1.1 per cent of the days with no distribution reported ⁽¹⁾ and to the 1.4 per cent for non-residents of a province, many of whom would be receiving insured out-of-province care, it may be concluded that close to 92 per cent of the days in listed hospitals in 1962 represented insured patient days. With respect to the remaining 8 per cent, it will be noted that 5.3 per cent of all patient days continue to be a federal responsibility; this category refers mainly to war veterans and includes a substantial element of domiciliary care that would not be accepted as hospital care by any provincial plan. After taking into account Workmen's Compensation Board care and non-acceptable care for insured residents, the remaining category of uninsured care for uninsured residents represented only 0.6 per cent of the overall total. As indicated in Table A2, the highest proportion of care for uninsured residents was in Ontario - 1.5 per cent and in Prince Edward Island - 1.4 per cent.

The volume of inpatient care may be considered as a function of two factors: the number of admissions to hospital and the average length of stay in hospital. Table 2 contains data on total days, admissions and separations of adult and child inpatients in hospitals listed in the Hospital Insurance Agreements. During 1962 the total days of care for adults and children was 36,702,611 or 1976 days per thousand population; the 2,941,409 admissions to hospital represented a rate of 158.4 admissions per thousand population. The average length of stay (patient days during year divided by separations) was 12.4 days⁽¹⁾. Total patient day, admission and separation rates per thousand population and the overall average length of stay by province in 1962 are shown in Table A3. As compared with the previous year, the volume of care rate was higher in each province except Saskatchewan, and the admission rate was lower only in Nova Scotia, New Brunswick and Saskatchewan.

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- (1) Undistributed days represent patient days where no distribution by responsibility for payment was reported by the hospital in its annual return.
 - (2) The figure of 12.4 days average stay in all listed facilities should not be confused with the figure of 10.1 days average stay in budget review general hospitals shown in Table 8.

TABLE 2

TOTAL PATIENT DAYS DURING YEAR, ADMISSIONS, SEPARATIONS AND AVERAGE LENGTH OF STAY, ADULTS AND CHILDREN, IN HOSPITALS LISTED IN HOSPITAL INSURANCE AGREEMENTS, NUMBER AND RATES PER 1,000 POPULATION, CANADA, 1962

Year	Reported Patient Days During Year	Reported Admissions During Year	Reported Separations During Year	Average Length of Stay – Patient Days During Year Divided By Separations
NUMBER				
1959 ⁽²⁾	22,288,332	1,903,327	1,900,214	11.7
1960 ⁽³⁾	25,135,920	2,088,073	2,092,743	12.0
1961 ⁽⁴⁾	35,599,317	2,876,549	2,871,986	12.2
1962 ⁽⁴⁾	36,702,611	2,941,409	2,937,746	12.4
RATE PER 1,000 POPULATION				
1959 ⁽²⁾	1,898.2	162.1	161.8	
1960 ⁽³⁾	1,980.5	164.5	164.9	
1961 ⁽⁴⁾	1,951.5	157.7	157.5	
1962 ⁽⁴⁾	1,976.4	158.4	158.2	

(1) Calculated for hospitals supplying data on patient days and separations.

(2) Limited to listed hospitals in seven provinces.

(3) Limited to listed hospitals in nine provinces.

(4) Listed hospitals in ten provinces and two territories.

Source: Table A3 and Annual Report for the Fiscal Year Ended March 31, 1963.

(b) Bed Facilities

As shown in Table 3, the number of hospitals listed in Hospital Insurance Agreements declined⁽¹⁾ from 1340 at the end of 1961 to 1305 at the end of 1962⁽²⁾. The total of 124,883 beds and cribs set up, as reported, represented an increase of 3,837 beds over the previous year, or a change from 6.6 to 6.7 beds per thousand population. Beds and cribs set up in each province in 1961 and 1962 are shown in Table A4. Nine provinces and territories increased their bed-population ratio, two remained about the same, and Saskatchewan recorded a slight decline.

The relationship of hospital bed facilities, hospital admissions and the volume of care in each province in 1962 is shown in Table 4, and points up the continuing wide variation among provinces with respect to overall hospital utilization rates and bed-population ratios. The sparsely populated Yukon and Northwest Territories had, as might be expected, by far the highest overall bed-population ratios, the highest admission rates, and a high volume of care. Alberta and Saskatchewan had more than 8 beds per thousand population, provided more than 2,000 days of care per thousand population, and admitted about 200 patients per thousand. Ontario, British Columbia, and Manitoba also had bed-population ratios and volume of care rates in excess of the national average. Quebec and the Atlantic provinces were below the national average with respect to bed-population ratios and with respect to patient days of care per thousand population. Eight provinces and territories had higher than average admission rates, while Ontario, Quebec, Nova Scotia and Newfoundland were below the national average.

The hospitals listed in the Agreements are classified by patient status as budget review, contract or federal hospitals, and Table 5 shows their distribution in numbers, beds and patient days by these categories. The budget review category represented about 73 per cent of the hospitals, as compared with less than 70 per cent in the previous year; it accounted for about 85 to 86 per cent of the beds and patient days as in the previous year. The contract type of arrangement pertains mainly to a number of small industrial and private hospitals, but also covers a considerable number of nursing homes included in the program on a year-to-year basis in Quebec, Ontario and Alberta; about 21 per cent of the hospitals

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- (1) A number of nursing homes, listed on a temporary basis, and some small outpost hospitals, were deleted; the number of beds increased as will be noted.
 - (2) There were 33 "other facilities" listed in 1962 as compared with 26 "other facilities" listed in 1961.

TABLE 3

NUMBER OF HOSPITALS LISTED IN HOSPITAL INSURANCE AGREEMENTS,
NUMBER OF HOSPITALS REPORTING, BEDS AND CRIBS SET UP ON DECEMBER 31,
AND RATE PER 1,000 POPULATION IN PARTICIPATING PROVINCES, CANADA, 1959 - 1962

Year	Number of Hospitals Listed in Provincial Agreements	Number of Hospitals Reporting	Beds and Cribs Set Up on December 31	
			Number	Rate Per 1,000 Population
1959	944	920	81,270	6.5
1960	1,052	1,024	86,178	6.8
1961	1,340 ⁽¹⁾	1,311	121,046	6.6
1962	1,305 ⁽²⁾	1,282	124,883	6.7

(1) Excludes 26 "other facilities" listed in 1961.

(2) Excludes 33 "other facilities" listed in 1962.

Source: Tables A 4 and A 5.

TABLE 4

TOTAL PATIENT DAYS DURING YEAR, ADMISSIONS DURING YEAR, AND
BEDS SET UP ON DECEMBER 31, PER 1,000 POPULATION, ADULTS
AND CHILDREN, IN HOSPITALS LISTED IN PROVINCIAL
AGREEMENTS, BY PROVINCE, 1961 AND 1962

PROVINCE	Rate per 1,000 Population					
	Patient-Days		Admissions		Beds and Cribs Set Up on December 31	
	1961	1962	1961	1962	1961	1962
Newfoundland	1,275.0	1,286.2	111.2	115.9	4.3	4.6
Prince Edward Island	1,604.6	1,677.1	155.1	159.5	6.2	6.4
Nova Scotia	1,600.4	1,615.6	148.3	147.7	5.6	5.7
New Brunswick	1,878.3	1,893.2	174.5	172.4	6.2	6.4
Quebec	1,795.2	1,813.7	138.0	139.3	6.1	6.1
Ontario	2,017.7	2,059.2	152.3	153.0	6.6	6.8
Manitoba	2,015.5	2,069.0	179.6	182.4	7.3	7.5
Saskatchewan	2,301.6	2,242.3	215.6	210.7	8.2	8.1
Alberta	2,414.6	2,445.1	196.4	196.3	8.5	8.6
British Columbia	1,992.5	1,993.6	175.4	176.1	6.6	6.8
Yukon	2,050.4	2,208.9	238.6	242.9	10.7	10.7
Northwest Territories	1,826.2	2,683.9	198.0	250.1	14.2	18.0
CANADA	1,951.9	1,976.4	157.7	158.4	6.6	6.7

Source: Tables A3 and A4.

TABLE 5

NUMBER AND PERCENTAGE DISTRIBUTION OF LISTED HOSPITALS, BEDS AND CRIBS SET UP ON DECEMBER 31, AND PATIENT DAYS DURING YEAR, ADULTS AND CHILDREN, IN HOSPITALS LISTED IN HOSPITAL INSURANCE AGREEMENTS, BY STATUS OF HOSPITAL, CANADA, 1962

Item	Budget Review	Contract	Federal Government	Total
NUMBER				
Number of Listed Hospitals ⁽¹⁾	951	270	84	1,305
Beds and Cribs Set Up ⁽²⁾	106,609	6,892	11,382	124,883
Patient Days During Year ⁽³⁾	31,527,005	2,047,196	3,128,410	36,702,611
PERCENT				
Number of Listed Hospitals	72.9	20.7	6.4	100.0
Beds and Cribs Set Up	85.4	5.5	9.1	100.0
Patient Days During Year	85.9	5.6	8.5	100.0

(1) Exclusive of 33 "other facilities".

(2) 23 hospitals did not report.

(3) 18 hospitals did not report.

Source: Tables A5, A6 and A7.

were on a contract arrangement in 1962. Listed also were 84 federal government hospitals, including veterans hospitals, Indian hospitals, and many small nursing stations operated by Indian and Northern Health Services.

The provincial distribution of listed hospitals, by payment status, in 1962 is shown for the number of hospitals in Table A5, for beds set up in Table A6 and for patient days in Table A7. From Table A5 it may be noted that Quebec, the Northwest Territories, Ontario and Alberta each had a substantial proportion of contract hospitals, amounting to 36 per cent, 33 per cent, 30 per cent and 21 per cent respectively, of all listed hospitals in the province or territory. But with respect to beds and cribs shown in Table A6, only in the Northwest Territories did contract hospitals account for a high percentage of the total; beds in contract hospitals were 9 per cent of the total in Alberta; 8 per cent in Quebec; and 6 per cent in Ontario.

(c) Budget Review Hospitals

Budget review hospitals included about seven-eighths of the beds and supplied seven-eighths of the volume of care in listed hospitals in 1962.

Table 6 presents a picture of the number and percentage distribution of the main types of beds and cribs for adults and children in budget review hospitals in 1962. It may be noted that 87.7 per cent of the beds set up were for the treatment of acute illness, while 12.3 per cent of the beds were set up for chronic-convalescent or long-term patients. In other words, there were seven acute beds for each chronic-convalescent bed set-up. The number of beds for general care (64,723) comprised 60.7 per cent of all the beds set up. Paediatric beds (13,871), accounting for 13.0 per cent were the next most numerous category. Obstetric beds (13,193) were roughly equal in number to the total number of chronic-convalescent beds set up. Psychiatric beds totalling 1,738 represented about 1.6 per cent of the total number of beds in budget review hospitals covered by the Hospital Insurance program. The distribution of types of beds by province is shown in Table A8.

Hospital beds may be classified also in terms of their bed status as standard, semi-private or private accommodation. Budget review hospitals are permitted to charge differential rates to those who choose semi-private or private hospital accommodation; individuals who select standard ward care, however, may not be charged

TABLE 6

BUDGET REVIEW HOSPITALS: NUMBER AND PERCENTAGE DISTRIBUTION
OF BEDS AND CRIBS SET UP BY TYPE OF UNIT; CANADA,
DECEMBER 31, 1962

Type of Unit	Number	Percent of Total
Acute Treatment:		
General ⁽¹⁾	64,723	60.7
Obstetric	13,193	12.4
Paediatric	13,871	13.0
Psychiatric	1,738	1.6
Total	93,525	87.7
Chronic and Convalescent ⁽²⁾	13,084	12.3
Combined Total	106,609	100.0
Number of Hospitals Reporting	950	

(1) Includes medicine-surgery, isolation, orthopaedic and other beds not specified as chronic, convalescent, geriatric or rehabilitation.

(2) Includes long-term, tuberculosis, and other beds specified as chronic, convalescent, geriatric or rehabilitation.

Source: Table A8

differential rates by the hospital. Table 7 and Table A9 contain information on the utilization of standard ward accommodation and preferred accommodation (semi-private and private beds) in budget review hospitals. About 62.4 per cent of the hospital beds represented standard ward accommodation at the end of 1962, although about 68.1 per cent of the days of care during the year were classified as standard. Conversely, 37.6 per cent of the beds were designated as preferred accommodation, although only 31.9 per cent of the days involved differential charges. It is interesting to note from Table A9 that the three prairie provinces and Newfoundland all had less than 20 per cent of the patient days classified as preferred accommodation days. By contrast, Ontario and Quebec had about 40 per cent of their hospital care in this category.

The overall average percentage occupancy of beds and cribs set up in budget review hospitals, was 81 per cent in 1962 as shown in Table 7, exactly the same as in the previous year. The indicated overall occupancy of standard ward beds was 88.4 per cent (up from 87.6 in the previous year) as compared with an average occupancy of 68.7 per cent in preferred accommodation (down from 69.8 in the previous year). The variation of occupancy between general and chronic hospitals was also large. Budget review general hospitals experienced an average occupancy of 80.3 per cent as shown in Table 8, while budget review chronic-convalescent hospitals had an average occupancy of 93.0 per cent, shown in Table 9. With respect to size of hospital, Table 8 demonstrates the occupancy increases with hospital size in budget review general hospitals. In 1962 the range was from 50.2 per cent occupancy in the 1-9 bed size group to 87.3 per cent in the 1000 and over size group, and Table A10 confirms that the relationship between occupancy and hospital size was similar in most provinces. Variations among provinces in the overall average occupancy levels have been determined partly by the relative extent to which hospital care is provided by small or large hospitals in each province.

Table 8 also shows a consistent pattern of increase in the length of stay, moving from small to large general hospitals, and Table A11 shows the average length of stay by size of hospital in each province for budget review general hospitals. The overall average length of stay of separations in budget review general hospitals in 1962 was 10.1 days; Table 9 records an average stay of separations of 163 days in chronic-convalescent hospitals.

TABLE 7

BUDGET REVIEW HOSPITALS: NUMBER AND PERCENTAGE DISTRIBUTION OF PATIENT DAYS DURING YEAR, BEDS AND CRIBS SET UP ON DECEMBER 31, AND PERCENTAGE OCCUPANCY, BY TYPE OF ACCOMMODATION, ADULTS AND CHILDREN, CANADA, 1962

Type of Accommodation	Number of Hospitals Reporting	Patient Days During Year	Beds and Cribs Set Up On December 31	Percentage Occupancy ⁽¹⁾
NUMBER				
Standard Ward	—	21,432,874	66,409	88.4
Preferred Accommodation	—	10,042,116	40,037	68.7
Total	949	31,474,990 ⁽¹⁾	106,446 ⁽²⁾	81.0
PERCENT				
Standard Ward		68.1	62.4	
Preferred Accommodation	—	31.9	37.6	—
Total		100.0	100.0	

(1) Excludes 48,045 days for which distribution by type of accommodation not reported.

(2) Excludes 163 beds for which distribution by type of accommodation not reported.

Source: Table A9 and Annual Returns of Hospitals.

TABLE 8

BUDGET REVIEW GENERAL HOSPITALS, NUMBER OF BEDS AND CRIBS SET UP ON
DECEMBER 31, AVERAGE LENGTH OF STAY AND PERCENTAGE OCCUPANCY, BY
BED-SIZE OF HOSPITAL, CANADA, 1962

Bed-Size of Hospital (Rated Bed Capacity)	Number of Hospitals Reporting	Beds and Cribs Set Up On December 31	Average Length of Stay		Percentage Occupancy
			Patient Days During Year Divided by Separations	Patient Days of Separations Divided by Separations	
1 - 9	70	784	6.9	6.8	50.2
10 - 24	198	3,854	7.2	7.2	62.7
25 - 49	189	7,166	7.7	7.7	70.1
50 - 99	139	10,232	8.6	8.6	75.4
100 - 199	128	18,259	9.1	9.1	79.3
200 - 299	48	11,308	10.3	10.3	79.0
300 - 499	44	16,674	11.0	11.0	84.8
500 - 999	27	17,493	12.0	12.2	86.9
1,000 and over	7	8,178	14.2	14.1	87.3
TOTAL	850	93,948	10.1	10.1	80.3

Source: Annual Returns of Hospitals and Tables A10 and A11.

TABLE 9

BUDGET REVIEW CHRONIC AND CONVALESCENT HOSPITALS: NUMBER OF BEDS AND CRIBS SET UP ON DECEMBER 31, AVERAGE LENGTH OF STAY AND PERCENTAGE OCCUPANCY⁽¹⁾, BY BED-SIZE OF HOSPITAL, CANADA, 1962

Bed Size of Hospital (Rated Bed Capacity)	Number of Hospitals Reporting	Beds and Cribs Set Up On December 31	Average Length of Stay		Percentage Occupancy ⁽¹⁾
			Patient Days During Year Divided by Separations	Patient Days of Separations Divided By Separations	
1 - 9	—	—	—	—	—
10 - 24	—	—	—	—	—
25 - 49	7	228	43.2	34.3	87.0
50 - 99	20	1,423	128.5	108.3	85.9
100 - 199	21	2,935	187.0	144.7	92.7
200 - 299	8	1,702	155.8	170.6	95.4
300 - 499	5	2,000	221.9	234.8	94.2
500 - 999	2	1,013	376.0	415.4	99.0
1,000 and over	—	—	—	—	—
TOTAL	63 ⁽¹⁾	9,301	172.2	162.7	93.0

(1) Patient days as a percentage of 365 times beds set up on December 31.

Source: Table A12 and Annual Returns of Hospitals.

(d) Contract and Federal Hospitals

Contract hospitals, comprising mainly small private hospitals and nursing homes, accounted for about 5.5 per cent of the beds and days of care in 1962 under the Hospital Insurance program. As shown in Table 10, they included a substantial number of chronic-convalescent beds. In fact, for contract hospitals, 61 per cent of the beds were reported as chronic-convalescent, while only 39 per cent belonged in the acute treatment category. Despite the preponderance of chronic-convalescent beds in the contract hospital group, average length of stay of separations is shown as only 17 days, and the percentage occupancy as 80.5 per cent.

With respect to federal government hospitals, 66 per cent of the beds were in the acute treatment category and 34 per cent were chronic-convalescent. The average length of stay was 35 days. The distribution of beds, average stay and percentage occupancy by province for budget review, contract and federal hospitals is shown in Tables A13 and A14.

2. Selected Data on Patient Characteristics

All provinces and territories have submitted some or all of the morbidity tables agreed to as a result of the recommendations of a Working Party and subsequent endorsement by the Advisory Committee, based on data collected for the calendar year 1962, and forwarded the tabulations to the Department of National Health and Welfare. Although there are variations among the provinces in the extent of statistical coverage, nevertheless it has been possible to produce combined figures for all or most of the provinces. A few of the more interesting features of these extensive tabulations have been selected for inclusion in this report. They include data on hospitalization rates calculated by age, sex, and diagnostic categories, and information on length of stay in hospital.

(a) Age and Sex Incidence

Table 11 shows the combined hospitalization rates by age and sex for separated adult and child in-patients in all provinces and territories in 1962, while Table A15 gives the same data for each individual province and territory. Nova Scotia and British Columbia limited their tabulations to Provincial Plan in-patients hospitalized within the province. Saskatchewan included all Provincial Plan cases including out-of-province hospitalization, with the exception of persons hospitalized in geriatric centres (chronic hospitals). Newfoundland and the Northwest Territories supplied complete information for all Provincial Plan patients including out-of-province care. The four

TABLE 10

CONTRACT AND FEDERAL HOSPITALS: NUMBER AND PERCENTAGE DISTRIBUTION OF BEDS AND CRIBS SET UP ON DECEMBER 31, BY TYPE OF UNIT, AVERAGE LENGTH OF STAY, AND PERCENTAGE OCCUPANCY, CANADA, 1962

Type of Unit	Contract Hospitals		Federal Government Hospitals	
	Number	Percent	Number	Percent
Acute Treatment				
General	1,887	27.4	5,409	47.5
Obstetric	507	7.4	158	1.4
Paediatric	253	3.7	422	3.7
Psychiatric	36	0.5	1,522	13.4
Total	2,683	38.9	7,511	66.0
Chronic and Convalescent	4,209	61.1	3,871	34.0
Combined Total	6,892	100.0	11,382	100.0
Average Length of Stay ⁽¹⁾	17.0		34.9	
Average Length of Stay ⁽²⁾	18.3		34.6	
Percentage Occupancy	80.5		75.8	
Number of Hospitals Reporting	255		76	

(1) Patient days since admission of separations divided by separations.

(2) Patient days during year divided by separations.

Source: Tables A13 and A14.

TABLE 11

HOSPITALIZATION, BY AGE AND SEX FOR IN-PATIENTS⁽¹⁾ INSURED BY PROVINCIAL PLANS⁽²⁾,
IN TEN PROVINCES AND TWO TERRITORIES, 1962.

	0-4 (1)	5-14	15-24	25-44	45-64	65-69	70+	Age Unknown	Total (1)
SEPARATIONS									
Male	203,836	177,374	103,788	206,287	240,037	55,037	141,903	74	1,128,336
Female	152,325	154,091	365,131	663,652	255,893	51,156	133,397	72	1,775,117
Total	356,161	331,465	468,919	869,939	495,930	106,193	275,300	146	2,904,053
SEPARATIONS PER 1,000 POPULATION									
Male	174.3	86.3	75.6	84.2	145.7	228.7	321.5	-	120.3
Female	136.5	78.4	270.2	273.3	160.2	204.1	275.4	-	193.2
Total	155.8	82.5	172.2	178.3	152.8	216.1	297.4	-	156.4
PATIENT DAYS SINCE ADMISSION									
Male	1,713,406	1,101,702	875,739	2,203,850	3,717,468	1,121,389	3,744,126	893	14,478,573
Female	1,302,528	913,368	2,307,042	5,158,130	3,850,429	1,081,443	4,583,003	838	19,197,781
Total	3,015,934	2,015,070	3,182,781	7,361,980	7,567,897	2,202,832	8,328,129	1,731	33,676,354
DAYS SINCE ADMISSION PER 1,000 POPULATION									
Male	1,465.3	536.1	638.3	899.1	2,256.8	4,658.9	8,482.4	-	1,544.0
Female	1,167.0	464.8	1,707.4	2,124.5	2,410.0	4,313.7	9,463.3	-	2,088.3
Total	1,319.7	501.2	1,168.8	1,508.8	2,332.2	4,482.8	8,995.6	-	1,813.5
AVERAGE STAY OF SEPARATIONS									
Male	8.4	6.2	8.4	10.7	15.5	20.4	26.4	12.1	12.8
Female	8.6	5.9	6.3	7.8	15.0	21.1	34.4	11.6	10.8
Total	8.5	6.1	6.8	8.5	15.3	20.7	30.3	11.9	11.6
POPULATION (In thousands)									
Male	1,169.3	2,055.2	1,372.0	2,451.3	1,647.2	240.7	441.4	-	9,377.1
Female	1,116.1	1,964.9	1,351.2	2,427.9	1,597.7	250.7	484.4	-	9,192.9
Total	2,285.4	4,020.1	2,723.2	4,879.2	3,244.9	491.4	925.8	-	18,570.0

(1) Excludes newborns.

(2) Prince Edward Island, New Brunswick, Manitoba and Alberta also include non-insured residents of the Province, Québec, Ontario and the Yukon include both resident and non-resident non-insured in-patients.

Source: Table A15.

provinces of Prince Edward Island, New Brunswick, Manitoba and Alberta went further, and included data on insured residents hospitalized within or outside the province, and on non-insured residents hospitalized within the province; inpatients who were not residents of the province were excluded. The provinces of Quebec and Ontario and the Yukon Territory included full information on all residents of the province hospitalized within or outside the province as well as data on out-of-province residents hospitalized within the province. ⁽¹⁾

Thus, the reader is cautioned that the national totals set out in the tables do include an element of double counting with respect to non-resident hospitalization in Ontario, Quebec and the Yukon Territory, while at the same time certain Plan patients and some non-Plan patients are excluded from the counts in various other provinces. These variations may affect the comparability of provincial data, although it is believed that the magnitude of the differences is not substantial with respect to the number of separations, but has significance for the counts of days of care in some age groups. Hospitalization rates have been calculated uniformly in relation to intercensal population estimates for 1962 prepared by age group and sex in all provinces and territories by the Dominion Bureau of Statistics. This has been done even for provinces that limited the data to Provincial Plan beneficiaries, since most of them lacked precise figures of the covered population by age and sex.

Tables 11 and A15 continue to demonstrate that women have higher overall hospitalization rates than men. The aggregate female separation rate of 193.2 per thousand population in 1962 was about 61 per cent higher than the corresponding male rate of 120.3, while the female days of care rate of 2,088 days per thousand population, was about 35 per cent higher than the male rate of 1,544 per thousand population. These differences between males and females were broadly similar in each of the provinces and territories.

Much of the difference in male and female hospitalization rates may be accounted for, of course, by maternity cases relating to women in the child-bearing age groups. Reference to Table 11 shows that the separation rates for females in the 15-24 and 25-44 age groups were more than three times higher than the rates for males in the same age groups. Within these two age groups, males accounted for only from 20 to 25 per cent of hospitalized cases, although their percentage share of combined days of care in the age groups was somewhat higher.

(1) Non-residents accounted for approximately 1.0 per cent of total days of care during the year in Quebec, 1.4 per cent in Ontario and 8.6 per cent in the Yukon Territory in 1962. See Table A2.

The male rates were higher than female among children in the 0-4 and 5-14 age groups. Moreover, beyond the age of 65 years, the male separation rates also were substantially higher than female rates, although females had a higher days of care rate in the 70+ age group. The main contribution to the higher female days of care rate came from Quebec, Ontario and Alberta; in most other provinces the male rate was higher for the 70+ age group.

If the data are examined in successive age groups it can be seen that the hospitalization rates for the 0-4 age group are relatively high, the separation rate of 156 per thousand population being close to the average for all age groups. High separation rates for pre-schoolers were particularly noticeable in Prince Edward Island, Manitoba, Saskatchewan, Alberta, British Columbia and the two territories. The highest volume of care rates for this age group existed in Newfoundland, Saskatchewan and the territories.

By far the lowest utilization rates for any age group were recorded by the 5-14 group, and this situation applied throughout all provinces and territories. The lowest separation rate (50 per thousand) was in Newfoundland, and the highest (147 per thousand) was in the Northwest Territories. However, Newfoundland along with Alberta and the territories had the highest volume of care rates (above 600 days per thousand) for this age group.

Following the 5-14 age group, the volume of care rate rises sharply for each successive age group shown in Table 11; the pattern is similar in each province. The separation rate increases also, although there is a dip in the separation rate from 45-64 as compared with the 25-44 group. The degree of variation between the highest and lowest utilization rates is large. Thus, the separation rate for the 70+ age group is about $3\frac{1}{2}$ times higher than the separation rate of the 5-14 age group, while the volume of care rate is about eighteen times higher - 8996 compared to 501 days per thousand population.

The average length of stay of separations, too, follows a parallel pattern for the successive age groups, with a drop off in average stay in the 5-14 group as compared to the 0-4 age group, followed by a higher average stay for each succeeding group. The shortest average stay was 6.1 days in the 5-14 age group while the average stay of the 70+ group was 30.3 days. The overall average stay for females in all age groups was 10.8 days and the male average stay was 12.8, the difference arising mainly from the relatively short stay in maternity care, of women in the child-bearing age groups.

In comparing the provinces with respect to average length of stay and hospitalization rates, perhaps the most striking data relate to the 70 plus age group. The province of Alberta, with participating nursing homes included in the data, provided 16.6 days of hospital care per person 70 years of age and over; the separation rate was 466 per thousand persons and the average length of stay was 35.5 days. Ontario recorded an even higher average stay of 41.3 days, with chronic hospital and chronic units included in the data; but the volume of care rate of 11.2 days per person was much lower than Alberta, because the Ontario separation rate was below the national average. Manitoba provided 8.7 days of care per person 70 and over, and Saskatchewan also had a high volume of care rate of 8.3 days per person in this age group, even though its geriatric centres (chronic hospitals) were not included in the statistical tabulations. Five other provinces: Prince Edward Island, Nova Scotia, New Brunswick, Quebec and British Columbia, had between five and seven days of care per person. The province of Newfoundland provided only about 2.9 days per person in the 70 plus age group.

(b) Length of Stay Groupings

The relatively high share of the volume of hospital care required by the older age groups is paralleled by the large share of hospital care days allocated to long-stay patients. The percentage distribution of the number of separations and of the patient days of these separations in terms of length of stay in hospital is shown for nine provinces and one territory in Tables A16 and A17. The long-stay cases of 30 days or more in hospital accounted for 6.1 per cent of the separations, but represented 39.3 per cent of all the patient days of care in 1962. Patients in hospital for 60 days or more were 1.7 per cent of the separations, and 24.2 per cent of the total hospital days of adult and child in-patients. In Ontario and Alberta, where a substantial amount of chronic care is covered by the hospital insurance program, the respective percentages of patient days for the "60-day-plus" stay group were 31.3 per cent and 33.8 per cent.

From these tables, it may be calculated also that short-stay cases of three days or less accounted for 26.2 per cent of all separations, and for 4.5 per cent of the total days of care in 1962. With respect to stays of one day in length, Ontario had the highest percentage of separations, 10.3 per cent, followed by Quebec with 9.4 per cent. However, with respect to the percentage distribution of short-stay cases of three days or less, the leaders were the four western provinces and Newfoundland, each having more than 28 per cent of all separations in this grouping.

(c) Hospital Morbidity

Table 12 contains aggregate data on hospitalization in eight provinces and two territories, distributed among 17 main diagnostic groupings and 94 specific diagnostic categories.⁽¹⁾ These categories, designated as the Canadian List of Diagnoses for Hospital Statistics, were selected from the International Statistical Classifications of Diseases, 1955 Revision, by the Working Party mentioned earlier and were accepted as the basis for coding of diagnoses by most provinces. As with the age and sex data submitted by the provinces, the degree of completeness varied and there were minor elements of overlapping. Nova Scotia, Saskatchewan, British Columbia, and the Northwest Territories limited the data to Provincial Plan patients; Prince Edward Island, Manitoba, and Alberta included uninsured residents as well; while Quebec, Ontario and the Yukon Territory included uninsured residents, and non-residents of the province in addition to Provincial Plan Patients.⁽²⁾

In 1962, as in the previous year, the broad grouping "XI. Deliveries and Complications of Pregnancy, Childbirth and the Puerperium" accounted for the largest percentage of separated cases (20.9 per cent) among the 17 main diagnostic groupings, and the specific category "75. Delivery Without Mention of Complications" was the leading cause of hospitalization (14.8 per cent of all separations) among the 94 specific diagnostic categories.⁽³⁾ Among other frequently occurring diagnoses were "73. Complications of Pregnancy" in fifth place and "74. Abortion" in eighth place. Although these diagnoses pertaining to pregnancy comprised more than one-fifth of all admissions, they accounted for only 10.4 per cent of patient days of care, because of the low average length of stay of 5.8 days.

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- (1) Excluded from the table are four specific categories grouped as Supplementary Classifications for Special Admissions, Live-Births and Stillbirths (95. Medical or Special Examination (without sickness) 96. Mature Liveborn 97. Immature newborn 98. Other Special Admissions, Examinations, etc.)
- (2) Newfoundland and New Brunswick did not provide hospital morbidity data for 1962.
- (3) In setting out the leading causes of hospital morbidity 16 "residual" or "multiple" categories in the 98 list were excluded from consideration.

TABLE 12

HOSPITALIZATION BY PRIMARY DIAGNOSIS ACCORDING TO THE CANADIAN LIST OF 98 DIAGNOSES, ADULT AND CHILD IN-PATIENTS INSURED BY PROVINCIAL PLANS⁽¹⁾, EIGHT PROVINCES⁽²⁾ AND TWO TERRITORIES, 1962

Canadian List Number and Diagnosis	I.S.C. No.	Separations		Days of Care For Separations		Average Stay of Separations	Percentage Distribution	
		Total	Per 1000 Population	Total	Per 1000 Population		Separations	Days of Care
ALL CAUSES ⁽³⁾ (1-94)		2,733,416	156.3	31,751,606	1815.1	11.6	100.0	100.0
I INFECTIVE AND PARASITIC DISEASES								
1. Tuberculosis, all forms	001-019	43,779	2.5	658,914	37.7	15.0	1.6	2.1
2. Poliomyelitis and encephalitis	080-083	3,557	0.2	91,621	5.2	25.8	0.1	0.3
3. Infectious hepatitis	092	2,570	0.1	105,882	6.1	41.2	0.1	0.3
4. Other diseases attributable to viruses	084-091, 093-096.	8,096	0.5	111,292	6.4	13.7	0.3	0.4
		14,150	0.8	132,097	7.6	9.3	0.5	0.4
5. Other infective bacterial, spirochaetal rickettsial or parasitic diseases	020-064, 070-074, 100-108, 110-117, 120-138	15,406	0.9	218,022	12.5	14.2	0.6	0.7
II NEOPLASMS								
6. Malignant neoplasms of buccal cavity and pharynx	140-148	144,125	8.2	2,697,432	154.2	18.7	5.3	8.5
7. Malignant neoplasm of stomach	151	2,420	0.1	52,613	3.0	21.7	0.1	0.2
8. Malignant neoplasm of large intestine except rectum	153	4,368	0.2	123,683	7.1	28.3	0.2	0.4
9. Malignant neoplasm of rectum	154	6,103	0.3	201,479	11.5	33.0	0.2	0.6
10. Malignant neoplasm of bronchus, trachea & lung, primary & unspecified as to whether primary or secondary	162,163	3,428	0.2	125,749	7.2	36.7	0.1	0.4
		5,810	0.3	159,332	9.1	27.4	0.2	0.5
11. Malignant neoplasm of breast	170	9,120	0.5	252,811	14.5	27.7	0.3	0.8
12. Malignant neoplasm of cervix uteri	171	5,784	0.3	106,488	6.1	18.4	0.2	0.3
13. Malignant neoplasm of uterus other than of cervix uteri	172-174	2,356	0.1	48,010	2.7	20.4	0.1	0.2
14. Malignant neoplasm of ovary, Fallopian tube and broad ligament	175	1,688	0.1	44,933	2.6	26.6	0.1	0.1
15. Malignant neoplasm of prostate	177	5,221	0.3	161,636	9.2	31.0	0.2	0.5

TABLE 12 (Cont'd)

Canadian List Number and Diagnosis	I.S.C. No.	Separations		Days of Care For Separations		Average Stay of Separations	Percentage Distribution	
		Total	Per 1000 Population	Total	Per 1000 Population		Separations	Days of Care
II NEOPLASMS (Cont'd)								
16. Malignant neoplasm of kidney, bladder and other urinary organs	180, 181	5,617	0.3	138,035	7.9	24.6	0.2	0.4
17. Leukaemia and aleukaemia	204	3,411	0.2	67,519	3.9	19.8	0.1	0.2
18. Other malignant neoplasms and neoplasms of lymphatic and haematopoietic tissue	150, 152, 155-161, 164, 165, 176, 178, 179, 190-199, 200-203, 205, 214, 215.	20,978	1.2	557,594	31.9	26.6	0.8	1.8
19. Benign neoplasm of uterus	22,057		1.3	232,200	13.3	10.5	0.8	0.7
20. Benign neoplasm of ovary	8,474		0.5	91,539	5.2	10.8	0.3	0.3
21. Benign neoplasms (excluding uterus and ovary) and neoplasm of unspecified nature	37,290		2.1	333,811	19.1	9.0	1.4	1.1
III ALLERGIC, ENDOCRINE SYSTEM, METABOLIC AND NUTRITIONAL DISEASES								
22. Asthma	241	72,547	4.1	1,126,398	64.4	15.5	2.7	3.5
23. Other allergic disorders (excluding asthma)	240, 242-245	16,542	0.9	182,862	10.5	11.1	0.6	0.6
24. Diseases of thyroid gland	250-254	5,859	0.3	51,409	2.9	8.8	0.2	0.2
25. Diabetes mellitus	260	11,444	0.7	132,583	7.6	11.6	0.4	0.4
26. Diseases of other endocrine glands	270-277	29,502	1.7	618,283	35.3	21.0	1.1	1.9
27. Avitaminoses and other metabolic diseases	280-289	2,837	0.2	41,098	2.3	14.5	0.1	0.1
		6,363	0.4	100,163	5.7	15.7	0.2	0.3
IV DISEASES OF THE BLOOD AND BLOOD-FORMING ORGANS								
28. Diseases of the blood and blood-forming organs	290-299	14,464	0.8	240,112	13.7	16.6	0.5	0.8
		14,464	0.8	240,112	13.7	16.6	0.5	0.8

TABLE 12 (Cont'd)

Canadian List Number and Diagnosis	I.S.C. No.	Separations		Days of Care For Separations		Average Stay of Separations	Percentage Distribution	
		Total	Per 1000 Population	Total	Per 1000 Population		Separation	Days of Care
V MENTAL, PSYCHONEUROTIC, AND PERSONALITY DISORDERS								
29. Psychoses	300-309	64,065	3.7	1,176,810	67.3	18.4	2.3	3.7
30. Psychoneurotic disorders	310-318	14,082	0.8	406,443	23.2	28.9	0.5	1.3
31. Disorders of character, behaviour, and intelligence	320-326	37,864	2.2	617,314	35.3	16.3	1.4	1.9
		12,119	0.7	153,053	8.7	12.6	0.4	0.5
VI DISEASES OF THE NERVOUS SYSTEM AND SENSE ORGANS								
32. Vascular lesions affecting central nervous system	330-334	128,042	7.3	3,279,702	187.5	25.6	4.7	10.3
33. Inflammatory and other diseases of central nervous system	340-345, 350-357	30,574	1.7	1,514,284	86.6	49.5	1.1	4.8
34. Diseases of nerves and peripheral ganglia	360-369	23,557	1.3	1,050,782	60.1	44.6	0.9	3.3
35. Diseases and conditions of the eye	370-389	9,151	0.5	119,635	6.8	13.1	0.3	0.4
36. Diseases of ear and mastoid process	390-398	35,212	2.0	339,017	19.4	9.6	1.3	1.1
		29,548	1.7	255,984	14.6	8.7	1.1	0.8
VII DISEASES OF THE CIRCULATORY SYSTEM								
37. Rheumatic fever and chronic rheumatic heart disease	400-402, 410-416	207,071	11.8	4,509,196	257.8	21.8	7.6	14.2
38. Arteriosclerotic and degenerative heart disease	420-422	10,980	0.6	230,514	13.2	21.0	0.4	0.7
39. Other diseases of the heart	430-434	86,236	4.9	2,222,484	127.0	25.8	3.2	7.0
40. Hypertensive heart disease and other hypertensive disease	440-447	20,629	1.2	398,432	22.8	19.3	0.8	1.3
		21,117	1.2	437,043	25.0	20.7	0.8	1.4
41. Diseases of arteries	450-456	12,669	0.7	601,989	34.4	47.5	0.5	1.9
42. Varicose veins of lower extremities	460	17,375	1.0	228,119	13.0	13.1	0.6	0.7
43. Haemorrhoids	461	17,914	1.0	166,979	9.5	9.3	0.7	0.5

TABLE 12 (Cont'd)

Canadian List Number and Diagnosis	I. S. C. No.	Separations		Days of Care For Separations		Average Stay of Separations	Percentage Distribution	
		Total	Per 1000 Population	Total	Per 1000 Population		Separation	Days of Care
VII DISEASES OF THE CIRCULATORY SYSTEM (Cont'd)								
44. Phlebitis and thrombophlebitis	463, 464	5,983	0.3	92,653	5.3	15.5	0.2	0.3
45. Other diseases of the circulatory system	462, 465-468	14,170	0.8	130,783	7.5	9.2	0.5	0.4
VIII DISEASES OF THE RESPIRATORY SYSTEM								
46. Acute upper respiratory infections	470-475	426,069	24.4	2,823,778	161.4	6.6	15.6	8.9
47. Influenza	480-483	44,117	2.5	268,988	15.4	6.1	1.6	0.8
48. Pneumonia	490-493	18,633	1.1	125,656	7.2	6.7	0.7	0.4
49. Bronchitis	500-502	87,808	5.0	1,057,530	60.5	12.0	3.2	3.3
50. Hypertrophy of tonsils and adenoids	510	51,195	2.9	518,495	29.6	10.1	1.9	1.6
51. Other diseases of respiratory system	511-527	180,295	10.3	393,435	22.5	2.2	6.6	1.2
		44,021	2.5	459,674	26.3	10.4	1.6	1.4
IX DISEASES OF THE DIGESTIVE SYSTEM								
52. Diseases of teeth and supporting structure	530-535	363,585	20.8	3,757,341	214.8	10.3	13.3	11.8
53. Ulcer of stomach, duodenum and jejunum	540-542	28,191	1.6	61,619	3.5	2.2	1.0	0.2
54. Gastritis, duodenitis and other disorders and diseases of the stomach and duodenum	543-545	42,713	2.4	628,453	35.9	14.7	1.6	2.0
		22,544	1.3	188,064	10.8	8.3	0.8	0.6
55. Appendicitis	550-553	52,331	3.0	421,578	24.1	8.0	1.9	1.3
56. Hernia of abdominal cavity	560, 561	57,917	3.3	545,229	31.2	9.4	2.1	1.7
57. Intestinal obstruction without mention of hernia	570	9,181	0.5	116,221	6.6	12.7	0.3	0.4
58. Gastro-enteritis and colitis, except ulcerative, age 4 weeks and over	571	43,609	2.5	345,589	19.8	7.9	1.6	1.1
59. Chronic enteritis and ulcerative colitis	572	10,441	0.6	175,945	10.1	16.9	0.4	0.6
60. Cirrhosis and other diseases of liver	580-583	7,443	0.4	134,832	7.7	18.1	0.3	0.4

TABLE 12 (Cont'd)

Canadian List Number and Diagnosis	I.S.C. No.	Separations		Days of Care For Separations		Average Stay of Separations	Percentage Distribution		
		Total	Per 1000 Population	Total	Per 1000 Population		Separation	Days of Care	
IX DISEASES OF THE DIGESTIVE SYSTEM (Cont'd)									
	61. Diseases of gallbladder and pancreas	584-587	57,219	3.3	813,982	46.5	14.2	2.1	2.6
	62. Other diseases of digestive system	536-539, 573-579	31,496	1.8	325,829	18.6	10.3	1.2	1.0
X DISEASES OF THE GENITO-URINARY SYSTEM			215,623	12.3	2,084,431	119.2	9.7	7.9	6.6
	63. Nephritis and nephrosis	590-594	6,720	0.4	135,248	7.7	20.1	0.2	0.4
	64. Infections of kidney	600	18,134	1.0	203,477	11.6	11.2	0.7	0.6
	65. Calculi of kidney, ureter and other parts of urinary system	602, 604	15,337	0.9	148,779	8.5	9.7	0.6	0.5
	66. Other diseases of urinary system	601, 603, 605-609	29,761	1.7	313,638	17.9	10.5	1.1	1.0
	67. Hyperplasia of prostate	610	15,999	0.9	340,462	19.5	21.3	0.6	1.1
	68. Redundant prepuce and phimosis	615	10,722	0.6	33,641	1.9	3.1	0.4	0.1
	69. Diseases of ovary, Fallopian tube and parametrium, and infective disease of uterus, vagina and vulva	622-626, 630	31,856	1.8	247,257	14.1	7.8	1.2	0.8
	70. Uterovaginal prolapse	631	16,868	1.0	247,064	14.1	14.6	0.6	0.8
	71. Disorders of menstruation	634	31,049	1.8	152,124	8.7	4.9	1.1	0.5
72. Other diseases of genital organs	611-614, 616, 617, 620, 621, 632, 633, 635-637	39,127	2.2	262,741	15.0	6.7	1.4	0.8	

TABLE 12 (Cont'd)

Canadian List Number and Diagnosis	I.S.C. No.	Separations		Days of Care For Separations		Average Stay of Separations	Percentage Distribution	
		Total	Per 1000 Population	Total	Per 1000 Population		Separations	Days of Care
XI DELIVERIES AND COMPLICATIONS OF PREGNANCY, CHILD BIRTH AND THE PUERPERIUM								
73. Complications of pregnancy	640-649	570,324	32.6	3,294,308	188.3	5.8	20.9	10.4
74. Abortion	650-652	73,991	4.2	330,102	18.9	4.5	2.7	1.0
75. Delivery without mention of complications	660	54,606	3.1	221,996	12.7	4.1	2.0	0.7
76. Delivery with specified complications	670-678	403,735	23.1	2,396,716	137.0	5.9	14.8	7.5
77. Complications of the puerperium	680-689	33,711	1.9	305,178	17.4	9.1	1.2	1.0
		4,281	0.2	40,316	2.3	9.4	0.2	0.1
XII DISEASES OF THE SKIN AND CELLULAR TISSUE								
78. Infection of skin and subcutaneous tissue	690-698	60,849	3.5	583,838	33.4	9.6	2.2	1.8
79. Other diseases of skin and subcutaneous tissue	700-716	30,234	1.7	237,263	13.6	7.8	1.1	0.7
		30,615	1.8	346,575	19.8	11.3	1.1	1.1
XIII DISEASES OF BONES AND ORGANS OF MOVEMENT								
80. Arthritis and rheumatism, except rheumatic fever	720-727	90,173	5.2	1,752,031	100.2	19.4	3.3	5.5
81. Displacement of intervertebral disc	735	35,352	2.0	878,223	50.2	24.8	1.3	2.8
82. Other diseases of bones and organs of movement	730-734, 736-738, 740-749	17,790	1.0	310,167	17.7	17.4	0.6	1.0
		37,031	2.1	563,641	32.2	15.2	1.4	1.8
XIV CONGENITAL MALFORMATIONS								
83. Congenital Malformations	750-759	24,981	1.4	382,076	21.8	15.3	0.9	1.2
		24,981	1.4	382,076	21.8	15.3	0.9	1.2
XV CERTAIN DISEASES OF EARLY INFANCY								
84. Certain diseases of early infancy	760-776	12,122	0.7	160,918	9.2	13.3	0.4	0.5
		12,122	0.7	160,918	9.2	13.3	0.4	0.5

TABLE 12 (Cont'd)

Canadian List Number and Diagnosis	I.S.C. No.	Separations		Days of Care For Separations		Average Stay of Separations	Percentage Distribution	
		Total	Per 1000 Population	Total	Per 1000 Population		Separations	Days of Care
XVI SYMPTOMS, SENILITY, AND ILL-DEFINED CONDITIONS 85. Symptoms, senility, and ill-defined conditions	780-795	60,480	3.5	558,186	31.9	9.2	2.2	1.8
		60,480	3.5	558,186	31.9	9.2	2.2	1.8
XVII ACCIDENTS, POISONINGS, AND VIOLENCE (NATURE OF INJURY) 86. Fracture of or involving skull or face bones, and head injury, except open wounds, contusion and haematoma of scalp 87. Fracture of spine and trunk 88. Fracture of upper limb 89. Fracture of femur 90. Other fractures of lower limbs (excluding femur) 91. Dislocation without fracture, and sprains and strains of joints and adjacent muscles 92. Internal injury of chest, abdomen and pelvis 93. Burns 94. Other and unspecified effects of accidents, poisonings and violence	N800-804, 852-856 N805-809 N810-819 N820, 821 N822-829 N830-848 N860-869 N940-949 N850, 851, N870-888, N890-898, N900-908, N910-918, N920-936 N950-999	235,117	13.4	2,666,135	152.4	11.3	8.6	8.4
		32,826	1.9	246,085	14.1	7.5	1.2	0.8
		12,896	0.7	275,011	15.7	21.3	0.5	0.9
		31,689	1.8	183,673	10.5	5.8	1.2	0.6
		13,691	0.8	696,568	39.8	50.9	0.5	2.2
		22,372	1.3	339,777	19.4	15.2	0.8	1.1
		21,768	1.2	178,366	10.2	8.2	0.8	0.6
		2,749	0.2	39,381	2.3	14.3	0.1	0.1
		9,823	0.6	161,845	9.3	16.5	0.4	0.5
		87,303	5.0	545,429	31.2	6.2	3.2	1.7

(1) Prince Edward Island, Manitoba and Alberta also include non-insured residents of the Province. Quebec and Ontario include both resident and non-resident non-insured in-patients.
(2) Excludes Newfoundland and New Brunswick.
(3) Excludes Y SUPPLEMENTARY CLASSIFICATIONS FOR SPECIAL ADMISSIONS, LIVEBIRTHS AND STILLBIRTHS (95-98).
Source: Data supplied to Department of National Health and Welfare by Provincial Plans, and Tables A18, A19, A20, A21 and A22.

The grouping "VIII. Diseases of the Respiratory System" comprised 15.6 per cent of all separated cases reported in Table 12. With an average length of stay of only 6.6 days, however, respiratory conditions made up only 8.9 per cent of all hospital days. A large proportion of the diagnoses in this grouping were in the category "50. Hypertrophy of Tonsils and Adenoids", which with 6.6 per cent of all separations was the second most frequently occurring diagnosis reported. Included also in the grouping of respiratory conditions was "48. Pneumonia", in fourth place among reported diagnoses and "49. Bronchitis", in tenth place.

The grouping "IX. Diseases of the Digestive System" includes such conditions as appendicitis, duodenal ulcer, hernia of the abdominal cavity and diseases of the gallbladder and pancreas. This grouping accounted for 13.3 per cent of the hospital cases and 11.8 per cent of the hospital days, and had an average length of stay somewhat slightly below the overall average. Among the major specific diagnoses in this grouping were "56. Hernia of the Abdominal Cavity" in sixth place, "61. Diseases of Gallbladder and Pancreas" in seventh place, and "55. Appendicitis" in ninth position.

The grouping "XVII. Accidents, Poisonings and Violence" contributed 8.6 per cent of the cases and 8.4 per cent of the hospital days. The specific category "89. Fracture of Femur" had the distinction of having the longest average length of stay of any diagnostic category - 50.9 days. The grouping "X. Diseases of the Genito-Urinary System" contributed 7.9 per cent of the separations and 6.6 per cent of the hospital days in the eight provinces and two territories.

Of major significance with respect to the volume of care are a number of groupings containing many of the diagnostic categories involving long average lengths of stay in hospital. Among these were "VI. Diseases of the Nervous System and Sense Organs" with 25.6 days average stay, "VII. Diseases of the Circulatory System" with 21.8 days average stay, "V. Mental, Psychoneurotic and Personality Disorders", with 18.4 days average stay, "II. Neoplasms" with 18.7 days average stay, and "III. Allergic, Endocrine System, Metabolic and Nutritional Diseases" with 15.5 days average stay. Thus, for example, "VII. Diseases of the Circulatory System" made up 7.6 per cent of the cases and 14.2 per cent of the days, and the grouping "II. Neoplasms" comprised 5.3 per cent of the cases and 8.5 per cent of the days. A specific category "38. Arteriosclerotic and

Degenerative Heart Disease" was the third most frequently occurring diagnosis and second only to "75. Delivery without Mention of Complications", with respect to days of care. Such data demonstrate that long-term diseases such as heart disease and cancer have a major impact on the volume of hospital care because of the relatively long period of stay in hospital.

Among the reporting provinces there were many interesting differences in hospitalization rates and average length of stay in 1962 for the different diagnostic categories. The statistics by province on separation rates, volume of care rates, percentage distribution of separations and of days, and the average length of stay by diagnostic categories may be found in Tables A18 and A22 inclusive. In examining these tables, it should be kept in mind that volume of care and length of stay rates for certain illnesses of a chronic or long-term nature may be particularly high in provinces that include a large measure of chronic hospital and nursing home type care in their hospital insurance program.

3. Hospital Personnel

The growth in the number of employed hospital personnel continued throughout 1962. Table 13 shows that the total number of persons employed on a full-time basis in hospitals listed in the Hospital Insurance Agreements increased from 186,072 in 1961 to 196,367 at the end of 1962, while part-time staff increased from 20,153 to 21,738. All provinces and one territory recorded an increase in full-time hospital staff between 1961 and 1962, and most provinces also experienced gains in the number of part-time personnel. Quebec and Ontario accounted for most of the increment.

In part, the substantial increase of hospital personnel since the commencement of the Hospital Insurance Program has reflected an increase of hospital usage and growth in the number of hospital beds. But in 1962, the percentage gain of employed full-time personnel was 5.5 per cent over the previous year, while hospital beds set up increased by 3.2 per cent, and patient days of care by 3.1 per cent. This was a continuation of the upward trend in the number of employees per bed and per patient day which has existed for a number of years. One of the contributing factors has been the progressive implementation of a shorter work week in hospitals across Canada, and the resultant need for more staff to perform a given quantity of work.

In addition, however, the number of paid hours of work per patient day has been increasing steadily, moving from a national average of 11.8 hours per patient day in budget review general hospitals in 1959

TABLE 13
NUMBER OF PERSONS EMPLOYED FULL-TIME AND PART-TIME IN HOSPITALS
LISTED IN HOSPITAL INSURANCE AGREEMENTS, BY PROVINCE,
AS AT DECEMBER 31, 1961 and 1962.

PROVINCE	Number of Hospitals Reporting		Full-Time		Part-Time	
	1961	1962	1961	1962	1961	1962
Newfoundland	42	43	3,004	3,129	146	104
Prince Edward Island	9	9	908	931	72	47
Nova Scotia	48	48	7,452	7,531	516	792
New Brunswick	40	39	6,715	6,893	530	389
Quebec	243	262	51,503	56,169	4,812	4,911
Ontario	325	321	66,466	70,205	9,172	10,537
Manitoba	100	101	10,053	10,604	1,431	1,410
Saskatchewan	160	160	10,310	10,389	709	734
Alberta	122	126	13,982	14,635	954	1,095
British Columbia	111	111	15,298	15,534	1,753	1,572
Yukon	3	3	139	158	36	64
Northwest Territories	22	19	242	189	22	83
CANADA	1,225	1,242	186,072	196,367	20,153	21,738

Source: 1961 and 1962 Annual Returns of Hospitals.

to 13.0 hours per day in 1962. There were signs of a levelling off process in a few provinces in 1962, although Table 14 indicates that the majority continued to show an increase over the previous year. The average number of paid hours per patient day has increased as a result of advances in medical knowledge, the multiplication of special facilities, the growing complexity of hospital services, and (perhaps in part) the decreasing severity of some staff shortages. All of these factors have contributed to the rise in the quantity of professional, technical and supportive services rendered in relation to the care of each patient.

Table 15 shows paid hours per patient day for nursing personnel separately from other personnel from 1959 to 1962. There was a material increase in nursing hours per patient day in each year in each province up to 1962, when there were some signs of levelling off in a few provinces. Aggregate paid hours of work for nursing personnel, accounting for well over one-half of all paid hours in budget review general hospitals, increased from 6.7 in 1961 to 7.0 hours per patient day in 1962. Paid hours of work for all other classes of personnel increased from 5.9 hours per patient day in 1961 to 6.0 hours in 1962.

4. Hospital Expenditures

This section of the report deals with gross operating expenditures of budget review hospitals only; thus, payments to contract and federal hospitals have been excluded. Gross operating expenditures include a number of cost items that are not shareable by the federal government under the Hospital Insurance Regulations.

In 1962, as shown in Table 16, the total revenue fund expenditure of budget review hospitals in the ten provinces and two territories was about \$782.4 million, an increase of about \$87 million or 12.5 per cent over the corresponding expenditures in 1961. The provinces of Ontario, Quebec, and Newfoundland were each above the national percentage increase with 13, 16.6, and 15.9 per cent respectively.

Table 17 which relates expenditures to patient days indicates among the provinces the degree to which hospital costs have been increasing in relation to volume of care. Expenditures per patient day in the participating provinces increased by \$1.54 between 1959 and 1960 and by \$1.70 between 1960 and 1961; in 1962 the increase in expenditure per patient day over the previous year was \$2.02. Excluding the Territories in 1962, the variations among the provinces ranged from \$26.14 in Ontario to \$18.80 per patient day in Prince Edward Island. It may be noted that provinces having a substantial proportion of thinly distributed rural population, and many small

TABLE 14

TOTAL PAID HOURS OF WORK PER PATIENT DAY IN BUDGET REVIEW
GENERAL HOSPITALS, BY PROVINCE, 1959, 1960, 1961, 1962

PROVINCE	Total Paid Hours Per Patient Day			
	1959	1960	1961	1962
Newfoundland(1)	12.4	13.0	14.0	14.9
Prince Edward Island	—	11.6	12.8	11.9
Nova Scotia	12.4	13.2	13.9(2)	13.8
New Brunswick	—	12.3	12.9	13.4
Quebec	—	—	13.0	13.9
Ontario	12.6	12.7	12.9	13.2
Manitoba	12.2	12.8	13.1	13.3
Saskatchewan	10.7	11.1	11.2	11.5
Alberta	10.6	10.8	11.3	11.4
British Columbia	11.0	11.1	11.2	11.4
Yukon	—	—	10.6	11.1
Northwest Territories	—	—	12.1	12.4
CANADA	11.8	12.1	12.6(2)	13.0

(1) Based on only six reporting hospitals from 1959 to 1961, and seven reporting hospitals in 1962 out of 37 hospitals.

(2) 1961 data adjusted for tabulating error for Nova Scotia hours of work contained in Table 15, Annual Report for the Fiscal Year Ended March 31, 1963.

Source: Annual Returns of Hospitals.

TABLE 15
TOTAL PAID HOURS OF NURSING AND OTHER PERSONNEL PER PATIENT DAY IN BUDGET REVIEW
GENERAL HOSPITALS, BY PROVINCE, 1959, 1960, 1961, 1962

PROVINCE	Nursing Personnel				Other Personnel			
	1959	1960	1961	1962	1959	1960	1961	1962
Newfoundland ⁽¹⁾	7.1	7.4	7.9	6.6	5.3	5.6	6.1	8.3
Prince Edward Island	-	6.7	7.3	6.9	-	4.9	5.4	5.0
Nova Scotia	6.5	7.1	7.4 ⁽²⁾	6.4	5.9	6.1	6.5 ⁽²⁾	7.4
New Brunswick	-	6.8	7.2	7.8	-	5.5	5.7	5.6
Quebec	-	-	6.4	6.9	-	-	6.6	7.0
Ontario	6.5	6.7	6.9	7.4	6.1	6.0	6.0	5.8
Manitoba	6.6	6.9	7.2	7.5	5.6	5.9	5.9	5.8
Saskatchewan	5.4	5.9	6.0	6.2	5.3	5.2	5.2	5.3
Alberta	5.8	6.0	6.3	6.6	4.8	4.8	5.0	4.8
British Columbia	5.9	6.0	6.1	6.4	5.1	5.1	5.1	5.0
Yukon	-	-	4.3	4.3	-	-	6.3	6.8
Northwest Territories	-	-	5.7	6.4	-	-	6.4	5.9
CANADA	6.2	6.5	6.7 ⁽²⁾	7.0	5.6	5.6	5.9 ⁽²⁾	6.0

(1) Based on only six reporting hospitals from 1959 to 1961, and seven reporting hospitals in 1962 out of 37 hospitals.

(2) 1961 data adjusted for tabulating error for Nova Scotia hours of work contained in Table 16, Annual Report for the Fiscal Year Ended March 31, 1963.

Source: Annual Returns of Hospitals.

TABLE 16
REVENUE FUND EXPENDITURES OF BUDGET REVIEW HOSPITALS, BY PROVINCE, 1959-1962

PROVINCE	1959	1960		1961		1962
	Amount	Amount	Percent Gain Over 1959	Amount	Percent Gain Over 1960	Amount
Newfoundland	\$ 8,190,684	\$ 9,436,015	15.2	\$ 10,503,086	11.3	\$ 12,170,769
Prince Edward Island	-	2,575,236	-	3,196,662	24.1	3,343,693
Nova Scotia	18,601,394	22,158,661	19.1	24,911,388	12.4	27,355,067
New Brunswick	-	20,842,604	-	23,752,195	14.0	26,084,877
Quebec	-	-	-	181,950,631	-	212,216,642
Ontario	196,420,820	230,264,746	17.2	258,880,912	12.4	292,542,267
Manitoba	29,008,256	32,368,470	11.6	35,744,290	10.4	38,992,907
Saskatchewan	37,301,138	38,729,329	3.8	40,063,624	3.4	42,216,251
Alberta	43,145,759	47,058,143	9.1	51,678,260	9.8	57,958,355
British Columbia	52,353,677	59,618,610	13.9	64,543,328	8.3	69,074,366
Yukon	-	-	-	165,771	-	180,728
Northwest Territories	-	-	-	244,400	-	254,753
CANADA	\$385,021,728	\$463,051,814	-	\$695,634,547	-	\$782,390,677
						12.5

Source: Table A23 and Annual Report for the Fiscal Year Ended March 31, 1963.

TABLE 17

REVENUE FUND EXPENDITURES OF BUDGET REVIEW HOSPITALS PER PATIENT DAY⁽¹⁾,
BY PROVINCE, 1959-1962

PROVINCE	1959	1960	1961	1962
Newfoundland	\$17.66	\$19.75	\$20.00	\$21.69
Prince Edward Island	—	16.74	19.04	18.80
Nova Scotia	18.56	21.45	23.66	25.37
New Brunswick	—	21.34	23.72	25.57
Quebec	—	—	22.63	25.58
Ontario	20.29	22.47	24.26	26.14
Manitoba	18.64	20.79	21.94	23.18
Saskatchewan	19.86	20.39	21.18	22.82
Alberta	17.36	18.49	20.42	21.65
British Columbia	21.75	22.60	23.85	25.50
Yukon	—	—	29.43	33.41
Northwest Territories	—	—	34.45	38.24
CANADA	\$19.77 ⁽²⁾	\$21.31 ⁽³⁾	\$23.01	\$25.03

(1) Patient days during year for adults and children.

(2) Average for seven participating provinces.

(3) Average for nine participating provinces.

Source: Table A24 and Annual Report for the Fiscal Year Ended March 31, 1963.

hospitals to serve them, such as Newfoundland, Prince Edward Island, Manitoba, Saskatchewan, and Alberta, had below average expenditures per patient day in their budget review hospitals.

When expressed in relation to population as in Table 18, per capita expenditures in 1962 range from \$46.13 in Ontario to \$25.89 in Newfoundland. Differences in per capita expenditures among provinces reflect the differences in hospital utilization, hospital facilities, and in the salary rates. The low per capita expenditure figures shown in the Yukon and the Northwest Territories may be explained by the existence of a large proportion of contract and federal government hospitals in the territories which provide a major proportion of the overall volume of care. Up to and including 1962, per capita expenditures increased each year in each of the participating provinces. The average per capita expenditure was \$38.14 in 1961 and \$42.13 in 1962.

The main account items of revenue fund expenditures in 1962 are shown in the four appendix tables A23, A24, A25, and A26. Expenses on salaries and wages accounted for 63.5 per cent of expenditures in 1962, a decline from the percentage of 64.5 in 1961. Variation among provinces was substantial with the four Atlantic Provinces, Yukon and the Northwest Territories having percentages well below the national average; Quebec and Alberta were also below the national average in this respect. The average cost of salaries and wages was \$15.89 per patient day, as compared with \$14.84 in 1961.

The cost of medical and surgical supplies was 76 cents per patient day in 1962, up from 73 cents in 1961. The overall drug costs per patient day remained exactly the same in 1962 as in 1961 - 99 cents. Raw food costs increased from \$1.46 per patient day to \$1.49 per patient day in 1962. Included under the heading "Other Supplies and Expenses" are fuel, electricity, water, insurance, replacement of bedding and linen, laundry supplies, housekeeping and cleaning supplies, repairs to buildings, furniture and equipment, maintenance of physical plant, printing, postage, stationery, office supplies, and telephones. This group of expense items showed a sharp increase from \$3.17 per patient day in 1961 to \$4.02 per patient day in 1962. The main items included under the heading "Other Revenue Fund Expense" are depreciation and interest; this group increased from \$1.82 to \$1.88 per patient day in 1962.

In summary, among the nine provinces that participated in the program from 1960 through to the end of 1962, the percentage rise for five provinces in 1962 was lower than the percentage rise in 1961, while for the remaining four the percentage in 1962 was greater than the percentage in 1961. Among the main factors contributing to the rise

TABLE 18

REVENUE FUND EXPENDITURES OF BUDGET REVIEW HOSPITALS PER CAPITA⁽¹⁾,
BY PROVINCE, 1959-1962

PROVINCE	1959	1960	1961	1962
Newfoundland	\$18.57	\$21.06	\$22.93	\$25.89
Prince Edward Island	—	25.00	30.55	31.54
Nova Scotia	25.87	30.47	33.80	36.67
New Brunswick	—	35.38	39.72	42.97
Quebec	—	—	34.59	39.55
Ontario	32.90	37.68	41.51	46.13
Manitoba	32.55	35.72	38.78	41.70
Saskatchewan	41.12	42.32	43.30	45.39
Alberta	34.57	36.45	38.79	42.30
British Columbia	33.41	37.21	39.61	41.64
Yukon	—	—	11.33	12.05
Northwest Territories	—	—	10.62	10.61
CANADA	\$32.68 ⁽²⁾	\$36.48 ⁽³⁾	\$38.14	\$42.13

(1) Based on intercensal estimates as at June 1, and 1961 Census of Population. Dominion Bureau of Statistics.

(2) Based on population of seven provinces.

(3) Based on population of nine provinces.

of hospital expenditures have been the growth of staff-patient ratios and payroll costs, the continuing application of new techniques and equipment in medical care, price inflation, population growth, and increased utilization of hospitals per unit of population.

APPENDIX TABLES

TABLE A1

INSURED PATIENT DAYS DURING YEAR⁽¹⁾, WITHIN RESPECTIVE PROVINCES, ADULTS AND CHILDREN, IN REPORTING HOSPITALS LISTED IN HOSPITAL INSURANCE AGREEMENTS, NUMBER AND RATES PER 1,000 INSURED POPULATION⁽²⁾, BY PROVINCE, 1959-1962

PROVINCE	Insured Patient Days During Year ⁽¹⁾				Insured Patient Days Per 1,000 Insured Population ⁽²⁾				Insured Population ⁽²⁾	
	1959	1960	1961	1962	1959	1960	1961(3)	1962(4)	1961(3)	1962(4)
Newfoundland	528,852	524,656	536,918	558,682	1,180.5	1,148.0	1,176.8	1,193.8	456,265	468,000
Prince Edward Island	-	140,857	149,805	164,802	-	1,622.6	1,722.3	1,761.8	86,979	93,541
Nova Scotia	999,955	1,030,541	1,051,424	1,080,556	1,436.7	1,468.0	1,467.3	1,492.5	716,552	724,000
New Brunswick	-	929,674	976,537	1,003,107	-	1,780.1	1,655.1	1,671.8	590,015	600,000
Quebec	-	-	8,077,091	8,686,653	-	-	1,541.3	1,624.9	5,240,328	5,346,000
Ontario	9,686,803	10,587,204	11,141,030	11,664,504	1,749.8	1,857.9	1,889.0	1,915.1	5,897,909	6,090,691
Manitoba	1,451,929	1,543,755	1,613,598	1,705,350 ⁽⁵⁾	1,661.7	1,750.1	1,777.7	1,861.7	907,665	916,000
Saskatchewan	1,952,785	1,990,543	1,997,712	1,965,028	2,224.0	2,240.5	2,242.9	2,199.3	890,678	893,485
Alberta	2,360,000	2,540,354	2,944,358	3,084,441	1,915.6	1,997.1	2,229.1	2,271.3	1,320,844	1,358,000
British Columbia	2,434,785	2,595,285	2,707,098	2,752,392	1,564.8	1,628.2	1,675.5	1,673.2	1,615,707	1,645,000
Yukon	-	-	24,871	27,836	-	-	1,756.3	1,988.3	14,161	14,000
Northwest Territories	-	-	27,402	31,811	-	-	1,230.8	1,325.5	22,264	24,000
CANADA	19,415,109	21,882,869	31,247,844	32,725,162	1,730.4	1,808.0	1,759.5	1,800.8	17,759,367	18,172,717
			Excluding Quebec				1,850.8	1,874.1		

(1) Provincial Plan responsibility days for hospitals located in the respective provinces, excluding out-of-province insured hospital care.

(2) Based on annual average number of insured persons under Provincial Plans approved for purposes of payment of shareable costs.

(3) Final population figure differs slightly from preliminary estimate, 1961.

(4) Preliminary population estimate.

(5) Includes an estimated 55,316 days in Deer Lodge Veterans Hospital.

TABLE A2

TOTAL PATIENT DAYS DURING YEAR, ADULTS AND CHILDREN, IN REPORTING HOSPITALS LISTED IN HOSPITAL INSURANCE AGREEMENTS, NUMBER AND PERCENTAGE DISTRIBUTION, BY RESPONSIBILITY FOR PAYMENT, BY PROVINCE, 1962

PROVINCE	(a) Number of Patient Days By Responsibility for Payment								Number of Hospitals Reporting
	Provincial Plan	Insured Residents Care Not Responsibility of Provincial Plan	Uninsured Residents of Province	Non-Residents of Province	Workmen's Compensation Boards	Federal Government	Undistributed Patient Days(1)	Total Patient Days	
Newfoundland	558,682	21,838	-	3,399	10,046	10,547	-	604,512	43
Prince Edward Island	164,802	1,571	2,581	3,340	1,798	3,685	-	177,777	9
Nova Scotia	1,080,556	610	1,815	18,569	16,916	86,744	-	1,205,210	48
New Brunswick	1,003,107	220	1,505	36,925	23,905	83,488	-	1,149,150	40
Quebec(2)	8,686,653	4,521	4,113	101,073	124,016	435,955	375,771	9,732,102	268
Ontario(3)	11,664,504	238,317	189,894	182,249	221,158	563,193	-	13,059,315	327
Manitoba(4)	1,705,350	714	3,032	61,576	24,343	139,520	-	1,934,535	102
Saskatchewan(5)	1,965,028	460	17,764	33,101	21,535	47,450	-	2,085,338	160
Alberta(6)	3,084,441	976	4,961	58,108	56,993	144,337	-	3,349,816	155
British Columbia(7)	2,752,392	18,395	11,845	26,096	74,596	423,984	-	3,307,308	109
Yukon	27,836	355	-	2,865	1,264	814	-	33,134	4
Northwest Territories(8)	31,811	65	19	3,063	758	11,715	16,983	64,414	22
CANADA	32,725,162	288,042	237,529	530,364	577,328	1,951,432	392,754	36,702,611	1,287

TABLE A2 Cont'd

PROVINCE	(b) Percentage Distribution of Patient Days By Responsibility for Payment								Number of Hospitals Reporting
	Provincial Plan	Insured Residents Care Not Responsibility of Provincial Plan	Uninsured Residents of Province	Non-Residents of Province	Workmen's Compensation Boards	Federal Government	Undistributed Patient Days ⁽¹⁾	Total Patient Days	
Newfoundland	92.4	3.6	—	0.6	1.7	1.7	—	100.0	43
Prince Edward Island	92.7	0.9	1.4	1.9	1.0	2.1	—	100.0	9
Nova Scotia	89.7	0.1	0.1	1.5	1.4	7.2	—	100.0	48
New Brunswick	87.3	*	0.1	3.2	2.1	7.3	—	100.0	40
Quebec	89.3	*	*	1.0	1.3	4.5	3.9	100.0	268
Ontario	89.3	1.8	1.5	1.4	1.7	4.3	—	100.0	327
Manitoba	88.2	*	0.1	3.2	1.3	7.2	—	100.0	102
Saskatchewan	94.2	*	0.9	1.6	1.0	2.3	—	100.0	160
Alberta	92.1	*	0.1	1.7	1.7	4.3	—	100.0	155
British Columbia	83.2	0.5	0.4	0.8	2.3	12.8	—	100.0	109
Yukon	84.0	1.1	—	8.6	3.8	2.5	—	100.0	4
Northwest Territories	49.4	0.1	*	4.8	1.2	18.2	26.3	100.0	22
CANADA	89.2	0.8	0.6	1.4	1.6	5.3	1.1	100.0	1,287

(1) No information available on distribution by responsibility for payment.

(2) Eight small hospitals did not report. Of 268 reporting hospitals, 13 did not report distribution of patient days by responsibility for payment.

(3) Six reporting hospitals were deleted from list during year. Five small hospitals did not report.

(4) Includes an estimate of 55,316 Provincial Plan days, and 125,924 federal days in Deer Lodge Veterans Hospital.

(5) Six small nursing stations did not report.

(6) Includes 338,890 Provincial Plan days in nursing homes. No other nursing home days reported.

(7) Two small nursing stations did not report.

(8) Inuvik General Hospital did not report distribution of patient days by responsibility for payment.

* Less than 0.05.

TABLE A3

TOTAL PATIENT DAYS DURING YEAR, ADMISSIONS, SEPARATIONS AND AVERAGE LENGTH OF STAY, ADULTS AND CHILDREN, IN HOSPITALS LISTED IN HOSPITAL INSURANCE AGREEMENTS, NUMBER AND RATES PER 1,000 POPULATION, BY PROVINCE, 1962

PROV- INCE	Patient Days During Year			Admissions During Year			Separations During Year			Average Length of Stay (1)
	Number of Hospitals Reporting	Number of Patient Days During Year	Rate Per 1,000 Population	Number of Hospitals Reporting	Number of Admissions During Year	Rate Per 1,000 Population	Number of Hospitals Reporting	Number of Separations During Year	Rate Per 1,000 Population	
Nfld.	43	604,512	1,286.2	43	54,451	115.9	43	54,629	116.2	11.1
P.E.I.	9	177,777	1,677.1	9	16,905	159.5	9	16,934	159.8	10.5
N.S.	48	1,205,210	1,615.6	48	110,163	147.7	48	110,115	147.6	10.9
N.B.	40	1,149,150	1,893.2	40	104,635	172.4	40	104,571	172.3	11.0
Que.	268	9,732,102	1,813.7	266	747,654	139.3	266	745,891	139.0	13.0
Ont.	327	13,059,315	2,059.2	327	970,460	153.0	327	969,272	152.8	13.5
Man.	102	1,934,535	2,069.0	100	170,534	182.4	100	170,407	182.3	11.3
Sask.	160	2,085,338	2,242.3	160	195,942	210.7	160	195,951	210.7	10.6
Alta.	155	3,349,816	2,445.1	126 ⁽²⁾	268,952	196.3	126 ⁽²⁾	268,690	196.1	11.2 ⁽²⁾
B.C.	109	3,307,308	1,993.6	109	292,067	176.1	109	291,650	175.8	11.3
Yukon	4	33,134	2,208.9	4	3,643	242.9	4	3,671	244.7	9.0
N.W.T.	22	64,414	2,683.9	20	6,003	250.1	20	5,965	248.5	10.8
CANADA	1,287	36,702,611	1,976.4	1,252	2,941,409	158.4	1,252	2,937,746	158.2	12.4

(1) Calculated for hospitals supplying data on patient days and separations.

(2) Excludes 29 nursing homes with 338,890 patient days.

TABLE A4
NUMBER OF BEDS AND CRIBS SET UP ON DECEMBER 31 IN HOSPITALS LISTED IN HOSPITAL INSURANCE
AGREEMENTS AND RATES PER 1,000 POPULATION, BY PROVINCE, 1961 AND 1962.

PROVINCE	Number of Hospitals Reporting		Beds and Cribs Set Up on December 31		Beds and Cribs Set Up Per 1,000 Population	
	1961	1962	1961	1962	1961	1962
Newfoundland	42	43	1,982	2,152	4.3	4.6
Prince Edward Island	9	9	651	674	6.2	6.4
Nova Scotia	48	48	4,138	4,241	5.6	5.7
New Brunswick	40	39	3,709	3,861	6.2	6.4
Quebec	281	266	32,338	32,816	6.1	6.1
Ontario	331	321	41,389	43,035	6.6	6.8
Manitoba	100	103	6,685	6,970	7.3	7.5
Saskatchewan	160	160	7,578	7,573	8.2	8.1
Alberta	162	156	11,382	11,733	8.5	8.6
British Columbia	111	111	10,710	11,236	6.6	6.8
Yukon	3	4	157	160	10.7	10.7
Northwest Territories	22	4, 22	327	432	14.2	18.0
CANADA	1,309(1)	1,282(2)	121,046	124,883	6.6	6.7

(1) 31 hospitals did not report in 1961.

(2) 23 hospitals did not report in 1962.

TABLE A5

NUMBER OF HOSPITALS AND OTHER FACILITIES AND PERCENTAGE DISTRIBUTION OF HOSPITALS LISTED IN HOSPITAL
INSURANCE AGREEMENTS, BY STATUS OF HOSPITAL, BY PROVINCE, DECEMBER 31, 1962

PROVINCE	Number and Percentage Distribution of Hospitals ⁽¹⁾							Number of Other Facilities ⁽²⁾	Total Number of Facilities
	Number			Percent					
	Budget Review	Contract	Federal Gov't	Total	Budget Review	Contract	Federal Gov't			Total
Newfoundland	37	5	1	43	86.0	11.6	2.3	1	44
Prince Edward Island	9	—	—	9	100.0	—	—	2	11
Nova Scotia	47	—	1	48	97.9	—	2.1	2	50
New Brunswick ⁽¹⁾	37	—	2	39	94.9	—	5.1	1	40
Quebec	163	99	14	276	59.1	35.9	5.1	2	278
Ontario	216	97	13	326	66.3	29.7	4.0	4	330
Manitoba ⁽¹⁾	79	7	17	103	76.7	6.8	16.5	2	105
Saskatchewan	152	8	6	166	91.6	4.8	3.6	6	172
Alberta	117	32	7	156	75.0	20.5	4.5	7	163
British Columbia	91	14	6	111	82.0	12.6	5.4	1	112
Yukon	2	—	2	4	50.0	—	50.0	1	5
Northwest Territories	1	8	15	24	4.2	33.3	62.5	1	25
CANADA	951	270	84	1,305	72.9	20.7	6.4	30	1,335

(1) Excludes three hospitals located in the U.S.A. near the Canadian border and listed in the Agreements for New Brunswick and Manitoba.

(2) Includes (a) 12 "other facilities" (budget review) as follows: Provincial Laboratories in Prince Edward Island, Saskatchewan and Alberta
(2); a medical arts laboratory in Saskatchewan; cancer clinics in Manitoba, Saskatchewan (2) and Alberta (3); and a
medical centre in Nova Scotia.

(b) 18 Red Cross Blood Depots (contract) in ten provinces and two territories.

TABLE A6

NUMBER AND PERCENTAGE DISTRIBUTION OF BEDS AND CRIBS SET UP, ON DECEMBER 31, IN HOSPITALS LISTED IN HOSPITAL INSURANCE AGREEMENTS, BY STATUS OF HOSPITAL AND BY PROVINCE, 1962

PROVINCE	Number of Hospitals Reporting	Number				Percent			
		Budget Review	Contract ⁽¹⁾	Federal Gov't. ⁽²⁾	Total	Budget Review	Contract ⁽¹⁾	Federal Gov't. ⁽²⁾	Total
Newfoundland	43	1,989	133	30	2,152	92.4	6.2	1.4	100.0
Prince Edward Island	9	674	-	-	674	100.0	-	-	100.0
Nova Scotia	48	3,794	-	447	4,241	89.5	-	10.5	100.0
New Brunswick	39	3,441	-	420	3,861	89.1	-	10.9	100.0
Quebec	266	27,790	2,732	2,294	32,816	84.7	8.3	7.0	100.0
Ontario	321	36,845	2,471	3,719	43,035	85.6	5.7	8.6	100.0
Manitoba	103	5,879	113	978	6,970	84.3	1.6	14.0	100.0
Saskatchewan	160	7,368	36	169	7,573	97.3	0.5	2.2	100.0
Alberta	156	9,605	1,089	1,039	11,733	81.9	9.3	8.8	100.0
British Columbia	111	9,144	105	1,987	11,236	81.4	0.9	17.7	100.0
Yukon	4	36	-	124	160	22.5	-	77.5	100.0
Northwest Territories	22	44	213	175	432	10.2	49.3	40.5	100.0
CANADA	1,282	106,609	6,892	11,382	124,883	85.4	5.5	9.1	100.0

(1) Fifteen contract hospitals did not report.

(2) Eight federal hospitals did not report.

TABLE A7

NUMBER AND PERCENTAGE DISTRIBUTION OF PATIENT DAYS DURING YEAR, ADULTS AND CHILDREN, IN HOSPITALS LISTED
IN HOSPITAL INSURANCE AGREEMENTS, BY STATUS OF HOSPITAL AND BY PROVINCE, 1962

PROVINCE	Number of Hospitals Reporting	Number				Percent			
		Budget Review	Contract	Federal Government	Total	Budget Review	Contract	Federal Government	Total
Newfoundland	43	561,041	39,468	4,003	604,512	92.8	6.5	0.6	100.0
Prince Edward Island	9	177,777	—	—	177,777	100.0	—	—	100.0
Nova Scotia	48	1,078,065	—	127,145	1,205,210	89.5	—	10.5	100.0
New Brunswick	40	1,022,913	—	126,237	1,149,150	89.0	—	11.0	100.0
Quebec	268	8,326,556	761,199	644,347	9,732,102	85.6	7.8	6.6	100.0
Ontario	327	11,193,907	832,954	1,032,454	13,059,315	85.7	6.4	7.9	100.0
Manitoba	102	1,681,972	22,611	229,952	1,934,535	86.9	1.2	11.9	100.0
Saskatchewan	160	2,036,560	5,917	42,861	2,085,338	97.7	0.2	2.1	100.0
Alberta	155	2,723,097	344,213	282,506	3,349,816	81.3	10.3	8.4	100.0
British Columbia	109	2,709,076	13,224	585,008	3,307,308	81.9	0.4	17.7	100.0
Yukon	4	5,409	—	27,725	33,134	16.3	—	83.7	100.0
Northwest Territories	22	6,662	31,580	26,172	64,414	10.3	49.0	40.6	100.0
CANADA	1,287	31,523,035	2,051,166	3,128,410	36,702,611	85.9	5.6	8.5	100.0

TABLE A8

BUDGET REVIEW HOSPITALS: NUMBER AND PERCENTAGE DISTRIBUTION OF BEDS AND CRIBS SET UP⁽¹⁾, BY TYPE OF UNIT, BY PROVINCE, 1962

PROVINCE	Acute Treatment					Chronic- Convales- cent ⁽³⁾	Total
	General ⁽²⁾	Obstetric	Paediatric	Psychi- atric	Total Acute Treatment		
NUMBER							
Newfoundland	1,279	244	392	7	1,922	67	1,989
Prince Edward Island	457	88	101	—	646	28	674
Nova Scotia	2,501	610	546	64	3,721	73	3,794
New Brunswick	2,194	526	622	48	3,390	51	3,441
Quebec	16,421	3,193	3,948	460	24,022	3,768	27,790
Ontario	21,928	4,446	3,813	743	30,930	5,915	36,845
Manitoba	3,297	722	728	135	4,882	997	5,879
Saskatchewan	4,745	898	1,077	129	6,849	519	7,368
Alberta	5,680	1,238	1,232	72	8,222	1,383	9,605
British Columbia	6,173	1,216	1,392	80	8,861	283	9,144
Yukon	24	6	6	—	36	—	36
Northwest Territories	24	6	14	—	44	—	44
CANADA	64,723	13,193	13,871	1,738	93,525	13,084	106,609
PERCENT							
Newfoundland	64.3	12.2	19.7	0.4	96.6	3.4	100.0
Prince Edward Island	67.8	13.0	15.0	—	95.8	4.2	100.0
Nova Scotia	65.9	16.1	14.4	1.7	98.1	1.9	100.0
New Brunswick	63.8	15.2	18.1	1.4	98.5	1.5	100.0
Quebec	59.1	11.5	14.2	1.6	86.4	13.6	100.0
Ontario	59.5	12.1	10.3	2.0	83.9	16.1	100.0
Manitoba	56.1	12.3	12.3	2.3	83.0	17.0	100.0
Saskatchewan	64.4	12.2	14.7	1.7	93.0	7.0	100.0
Alberta	59.1	12.9	12.8	0.7	85.6	14.4	100.0
British Columbia	67.5	13.3	15.2	0.9	96.9	3.1	100.0
Yukon	66.7	16.7	16.7	—	100.0	—	100.0
Northwest Territories	54.5	13.6	31.8	—	100.0	—	100.0
CANADA	60.7	12.4	13.0	1.6	87.7	12.3	100.0

(1) All 950 listed hospitals submitted reports.

(2) Includes medicine-surgery, isolation, orthopaedic and other acute treatment beds excluding paediatric and obstetric.

(3) Includes long-term tuberculosis and other beds specified as chronic, convalescent, geriatric or rehabilitation.

TABLE A9

BUDGET REVIEW HOSPITALS: NUMBER AND PERCENTAGE DISTRIBUTION OF PATIENT DAYS DURING YEAR, ADULTS AND CHILDREN, AND PERCENTAGE OCCUPANCY, BY TYPE OF ACCOMMODATION, BY PROVINCE, 1962

PROVINCE	Number of Hospitals Reporting	Standard Ward		Preferred Accommodation					Total Accommodation		
		Patient Days During Year	Percent of Total	Percentage Occupancy	Patient Days During Year			Percent of Total	Percentage Occupancy	Patient Days During Year	Percentage Occupancy
					Private	Semi-Private	Total Preferred Accommodation				
Nfld.	37	499,258	89.0	79.6	22,355	39,428	61,783	11.0	63.9	561,041	77.3
P.E.I.	9	137,268	77.2	94.5	8,718	31,791	40,509	22.8	40.2	177,777	72.6
N.S.	47	779,256	72.3	89.3	107,570	191,239	298,809	27.7	58.3	1,078,065	77.8
N.B.	37	664,540	65.1	86.0	106,736	248,938	355,674	34.9	71.1	1,020,214(1)	81.2
Que.	163	4,995,618	60.0	92.5	1,033,793	2,295,672	3,329,465	40.0	70.2	8,325,083(2)	82.1
Ont.	216	6,755,866	60.4	90.6	902,319	3,535,722	4,438,041	39.6	74.4	11,193,907	83.2
Man.	79	1,368,930	81.4	80.7	54,743	258,299	313,042	18.6	69.7	1,681,972	78.4
Sask.	152	1,792,766	88.0	83.6	84,598	159,196	243,794	12.0	44.7	2,036,560	75.7
Alta.	117	2,303,496	84.6	85.5	146,283	273,318	419,601	15.4	51.9	2,723,097	77.7
B.C.	89	2,123,939	79.7	88.0	190,548	350,716	541,264	20.3	62.6	2,665,203(3)	82.6
Yukon	2	5,275	97.5	40.1	134	-	134	2.5	12.2	5,409	38.0
N.W.T.	1	6,662	100.0	41.5	-	--	-	-	-	6,662	41.5
CANADA	949	21,432,874	68.0	88.4	2,657,797	7,384,319	10,042,116	31.9	68.7	31,474,990(4)	81.0

(1) Excludes 2,699 days in hospital which closed during the year.

(2) Excludes 1,473 days in hospital which closed during the year.

(3) Excludes 43,873 days for which distribution by type of accommodation not reported.

(4) Excludes 48,045 days as per footnote (1), (2) and (3).

TABLE A10

BUDGET REVIEW GENERAL HOSPITALS: PERCENTAGE OCCUPANCY⁽¹⁾ BY BED SIZE OF HOSPITAL AND BY PROVINCE, 1962

PROVINCE	Number of Hospitals Reporting	Bed-Size of Hospital (Rated Bed Capacity)								1,000 and over	T total
		1-9	10-24	25-49	50-99	100-199	200-299	300-499	500-999		
Newfoundland	37	37.5	60.4	62.3	61.5	90.5	79.5	100.9	-	-	77.3
Prince Edward Island	8	67.8	45.2	67.5	65.6	83.3	60.2	-	-	-	71.2
Nova Scotia	44	42.0	58.2	74.8	78.3	74.7	81.1	63.6	97.3	-	77.7
New Brunswick	34	93.3	85.6	77.7	79.1	77.0	84.5	81.7	83.6	-	81.5
Quebec	125	64.2	63.0	72.5	78.3	79.6	69.4	83.2	88.2	84.9	81.4
Ontario	189	47.8	64.8	72.3	77.7	79.2	81.8	82.0	86.3	89.0	82.3
Manitoba	74	60.3	62.0	69.0	73.1	76.6	78.3	85.6	88.8	-	78.2
Saskatchewan	149	51.2	63.0	69.4	73.8	75.9	83.2	93.5	80.1	-	74.5
Alberta	101	46.1	58.0	68.3	69.2	76.7	80.6	89.5	85.4	79.7	76.3
British Columbia	86	-	59.9	69.4	79.9	80.5	85.7	87.7	87.2	91.9	82.0
Yukon	2	-	41.2	-	-	-	-	-	-	-	41.2
Northwest Territories	1	-	-	41.5	-	-	-	-	-	-	41.5
CANADA	850	50.2	62.7	70.1	75.4	79.3	79.0	84.8	86.9	87.3	80.3

(1) Patient days as a percentage of 365 times beds set up on December 31. Adjustments made for hospitals in operation for part of year only. Excludes bassinets and newborn days.

TABLE A11

BUDGET REVIEW GENERAL HOSPITALS: AVERAGE LENGTH OF STAY⁽¹⁾, ADULTS AND CHILDREN, BY BED SIZE OF HOSPITAL AND BY PROVINCE, 1962

PROVINCE	Number of Hospitals Reporting	Bed-Size of Hospital (Rated Bed Capacity)									
		1-9	10-24	25-49	50-99	100-199	200-299	300-499	500-999	1,000 and over	Total
Newfoundland	16(2)	6.7	3.9	6.3	15.8	8.3	10.5	26.7	—	—	12.9
Prince Edward Island	8	6.8	8.6	7.7	7.6	10.2	11.2	—	—	—	9.8
Nova Scotia	44	7.6	7.2	8.6	9.6	9.5	11.5	8.8	13.7	—	10.1
New Brunswick	32(3)	6.2	6.8	7.6	8.2	9.4	9.4	12.5	15.4	—	9.8
Quebec	118(4)	7.2	7.0	7.1	8.1	8.7	10.1	10.8	12.5	13.5	10.3
Ontario	189	6.6	8.1	9.2	9.8	9.3	10.5	10.8	11.6	14.3	10.7
Manitoba	74	7.0	7.0	6.8	8.0	9.3	8.5	9.2	11.8	—	9.0
Saskatchewan	149	7.5	7.3	7.6	8.4	10.2	13.5	11.5	13.4	—	9.6
Alberta	101	5.8	7.3	6.6	7.9	9.2	9.9	9.7	10.3	16.3	9.2
British Columbia	86	—	7.5	7.5	7.9	8.7	9.0	11.0	11.0	13.7	9.5
Yukon	2	—	9.4	—	—	—	—	—	—	—	9.4
Northwest Territories	1	—	—	6.6	—	—	—	—	—	—	6.6
CANADA	820	6.9	7.2	7.7	8.6	9.1	10.3	11.0	12.0	14.2	10.1

(1) Patient days since admission of separations divided by separations during year.

(2) Excludes 21 hospitals for which patient days of separations not reported. If calculated on the basis of patient days during year divided by separations in 37 Newfoundland hospitals the average stay would be as follows: 1 to 9 - 6.5; 10 to 24 - 6.1; 25 to 49 - 7.3; 50 to 99 - 10.0; 100 to 199 - 10.0; 200 to 299 - 10.8; 300 to 499 - 25.5; total - 10.8.

(3) Excludes two hospitals for which patient days of separations not reported.

(4) Excludes seven hospitals for which patient days of separations not reported.

TABLE A12
BUDGET REVIEW CHRONIC AND CONVALESCENT HOSPITALS: BEDS SET UP ON DECEMBER 31, AVERAGE
LENGTH OF STAY, AND PERCENTAGE OCCUPANCY, BY PROVINCE, 1962

PROVINCE	Number of Hospitals Reporting	Beds and Cribs Set Up On December 31	Average Length of Stay		Percentage Occupancy
			Patient Days During Year Divided By Separations	Patient Days of Separations Divided By Separations	
Newfoundland	-	-	-	-	-
Prince Edward Island	-	-	-	-	-
Nova Scotia	1	53	31.0	31.6	79.3
New Brunswick	-	-	-	-	-
Quebec	19 ⁽¹⁾	2,998	149.8	132.8	94.1
Ontario	24	4,184	200.1	209.4	94.8
Manitoba	4	890	105.3	87.6	89.8
Saskatchewan	-	-	-	-	-
Alberta	14	1,124	484.0	344.7	88.3
British Columbia	1	52	69.5	231.9	61.5
Yukon	-	-	-	-	-
Northwest Territories	-	-	-	-	-
CANADA	63	9,301	172.2	162.7	93.0

(1) Excludes six hospitals which did not report.

TABLE A13

CONTRACT AND FEDERAL HOSPITALS: NUMBER OF BEDS AND CRIBS SET UP
ON DECEMBER 31, BY TYPE OF UNIT, BY PROVINCE, 1962

PROVINCE	Number of Hospitals Reporting	Acute Treatment					Chronic- Convales- cent(2)	Total
		General(1)	Obstetric	Paediatric	Psychi- atric	Total		
	CONTRACT							
Newfoundland	5	38	4	3	—	45	88	133
Prince Edward Island	—	—	—	—	—	—	—	—
Nova Scotia	—	—	—	—	—	—	—	—
New Brunswick	—	—	—	—	—	—	—	—
Quebec	91	814	331	109	—	1,254	1,478	2,732
Ontario	94	692	101	65	36	894	1,577	2,471
Manitoba	7	82	13	18	—	113	—	113
Saskatchewan	5	11	21	4	—	36	—	36
Alberta	32	23	11	4	—	38	1,051(3)	1,089
British Columbia	14	93	5	7	—	105	—	105
Yukon	—	—	—	—	—	—	—	—
Northwest Territories	7	134	21	43	—	198	15	213
CANADA	255	1,887	507	253	36	2,683	4,209	6,892
FEDERAL GOVERNMENT								
Newfoundland	1	16	8	6	—	30	—	30
Prince Edward Island	—	—	—	—	—	—	—	—
Nova Scotia	1	231	—	—	24	255	192	447
New Brunswick	2	256	—	—	32	288	132	420
Quebec	13	895	10	8	578	1,491	803	2,294
Ontario	11	1,788	25	63	782	2,658	1,061	3,719
Manitoba	17	582	39	55	62	738	240	978
Saskatchewan	3	47	11	51	—	109	60	169
Alberta	6	444	26	125	—	595	444	1,039
British Columbia	6	940	3	61	44	1,048	939	1,987
Yukon	2	68	24	32	—	124	—	124
Northwest Territories	14	142	12	21	—	175	—	175
CANADA	76	5,409	158	422	1,522	7,511	3,871	11,382

(1) Includes medicine-surgery, isolation orthopaedic and other acute treatment beds excluding paediatric and obstetric.

(2) Includes long-term tuberculosis and other beds specified as chronic, convalescent, geriatric or rehabilitation.

(3) Includes beds in 30 nursing homes not shown for 1961 in Table A12, Annual Report for the fiscal year ended March 31, 1963.

TABLE A14

CONTRACT AND FEDERAL HOSPITALS: AVERAGE LENGTH OF STAY AND PERCENTAGE
OCCUPANCY BY PROVINCE, 1962

PROVINCE	Average Length of Stay(1)		Average Length of Stay(2)		Percentage Occupancy(3)	
	Contract	Federal	Contract	Federal	Contract	Federal
Newfoundland	4.8	4.9	4.6	4.9	46.5	36.6
Prince Edward Island	—	—	—	—	—	—
Nova Scotia	—	34.0	—	31.9	—	77.9
New Brunswick	—	12.2	—	15.4	—	82.3
Quebec	16.7	50.0	14.3	51.4	79.6	77.7
Ontario	24.5	47.7	24.0	48.8	89.4	76.1
Manitoba	6.5	19.2	6.4	20.0	54.8	65.1
Saskatchewan	6.6	18.0	6.7	18.6	45.0	69.5
Alberta	5.3	27.9	5.4	27.0	38.4	74.5
British Columbia	4.7	49.4	4.7	46.3	34.5	80.7
Yukon	—	9.2	—	9.1	—	63.2
Northwest Territories	11.0	7.4	10.3	7.6	40.6	32.0
CANADA	18.3	34.6	17.0	34.9	80.5	75.8

(1) Based on total patient days during year divided by separations.

(2) Based on patient days since admission of separations divided by separations.

(3) Patient days as a percentage of 365 times beds set up on December 31.

TABLE A15

HOSPITALIZATION BY AGE AND SEX, PROVINCIAL PLAN IN-PATIENTS, (1) NEWFOUNDLAND, 1962

	0-4(2)	5-14	15-24	25-44	45-64	65-69	70+	Age Unknown	Total(2)
SEPARATIONS									
Male	5,494	3,336	2,230	3,634	3,063	652	1,335	11	19,755
Female	4,285	2,993	9,544	13,965	3,459	653	1,097	17	36,013
Total	9,779	6,329	11,774	17,599	6,522	1,305	2,432	28	55,768
SEPARATIONS PER 1,000 POPULATION									
Male	154.3	52.4	56.0	68.1	88.3	133.1	150.0	-	82.0
Female	124.9	48.4	241.6	288.5	110.5	133.3	126.1	-	157.3
Total	139.9	50.4	148.5	172.9	98.8	133.2	138.2	-	118.7
PATIENT DAYS SINCE ADMISSION									
Male	71,161	38,473	25,226	44,530	50,634	12,979	26,558	163	269,724
Female	61,417	38,389	58,048	95,291	50,701	12,159	23,643	206	339,854
Total	132,578	76,862	83,274	139,821	101,335	25,138	50,201	369	609,578
DAYS SINCE ADMISSION PER 1,000 POPULATION									
Male	1,998.9	604.0	633.8	833.9	1,459.2	2,648.8	2,984.0	-	1,119.2
Female	1,790.6	620.2	1,469.6	1,968.8	1,619.8	2,481.4	2,717.6	-	1,484.1
Total	1,896.7	612.0	1,050.1	1,373.5	1,535.4	2,565.1	2,852.3	-	1,297.0
AVERAGE STAY OF SEPARATIONS									
Male	13.0	11.5	11.3	12.3	16.5	19.9	19.9	14.8	13.7
Female	14.3	12.8	6.1	6.8	14.7	18.6	21.6	12.1	9.4
Total	13.6	12.1	7.1	7.9	15.5	19.3	20.6	13.2	10.9
POPULATION (In Thousands) (3)									
Male	35.6	63.7	39.8	53.4	34.7	4.9	8.9	-	241.0
Female	34.3	61.9	39.5	48.4	31.3	4.9	3.7	-	229.0
Total	69.9	125.6	79.3	101.8	66.0	9.8	17.6	-	470.0

(1) Includes out-of-province hospitalization, but excludes newborns.

(2) Excludes newborns.

(3) Derived from Dominion Bureau of Statistics Estimated Population by Sex and Age Group, for Canada and Provinces, 1962.

TABLE A15
HOSPITALIZATION BY AGE AND SEX, PRINCE EDWARD ISLAND RESIDENT IN-PATIENTS⁽¹⁾, PRINCE EDWARD ISLAND, 1962

	0-4 ⁽²⁾	5-14	15-24	25-44	45-64	65-69	70+	Total ⁽²⁾
SEPARATIONS								
Male	1,375	931	648	954	1,546	485	1,248	7,187
Female	1,048	773	2,240	3,813	1,552	399	1,347	11,172
Total	2,423	1,704	2,888	4,767	3,098	884	2,595	18,359
SEPARATIONS PER 1,000 POPULATION								
Male	202.2	74.5	77.1	84.4	159.4	269.4	346.7	132.8
Female	158.8	63.9	287.2	349.8	176.4	221.7	345.4	215.3
Total	180.8	69.3	178.3	214.7	167.5	245.6	346.0	173.2
PATIENT DAYS SINCE ADMISSION								
Male	12,532	8,148	4,788	11,130	21,020	7,484	21,481	86,583
Female	9,737	6,335	13,153	26,013	19,063	5,855	23,871	104,027
Total	22,269	14,483	17,941	37,143	40,083	13,339	45,352	190,610
DAYS SINCE ADMISSION PER 1,000 POPULATION								
Male	1,842.9	651.8	570.0	985.0	2,167.0	4,157.8	5,966.9	1,600.4
Female	1,475.3	523.6	1,686.3	2,386.5	2,166.2	3,252.8	6,120.8	2,004.4
Total	1,661.9	588.7	1,107.5	1,673.1	2,166.6	3,705.3	6,046.9	1,798.2
AVERAGE STAY OF SEPARATIONS								
Male	9.1	8.8	7.4	11.7	13.6	15.4	17.2	12.0
Female	9.3	8.2	5.9	6.8	12.3	14.7	17.7	9.3
Total	9.2	8.5	6.2	7.8	12.9	15.1	17.5	10.4
POPULATION ⁽³⁾ (In Thousands)								
Male	6.8	12.5	8.4	11.3	9.7	1.8	3.6	54.1
Female	6.6	12.1	7.8	10.9	8.8	1.8	3.9	51.9
Total	13.4	24.6	16.2	22.2	18.5	3.6	7.5	106.0

(1) Includes "Provincial Plan" in-patients and also those not the responsibility of the "Provincial Plan", but excludes non-residents of the Province. Includes out-of-province hospitalization.

(2) Excludes newborns.

(3) Derived from Dominion Bureau of Statistics Estimated Population by Sex and Age Groups, for Canada and Provinces, 1962.

TABLE A15

HOSPITALIZATION BY AGE AND SEX, PROVINCIAL PLAN IN-PATIENTS⁽¹⁾, NOVA SCOTIA, 1962

	0-4 ⁽¹⁾	5-14	15-24	25-44	45-64	65-69	70+	Total ⁽¹⁾
SEPARATIONS								
Male	6,895	5,952	3,254	5,607	8,769	2,306	6,203	38,986
Female	4,997	5,191	15,520	22,773	9,154	2,123	5,875	65,633
Total	11,892	11,143	18,774	28,380	17,923	4,429	12,078	104,619
SEPARATIONS PER 1,000 POPULATION								
Male	146.7	69.5	53.3	63.8	131.9	221.7	307.1	102.9
Female	111.0	63.8	271.8	260.6	146.0	194.8	257.7	178.7
Total	129.3	66.7	158.8	161.9	138.7	207.9	280.9	140.2
PATIENT DAYS SINCE ADMISSION								
Male	61,673	37,778	28,730	61,984	130,876	41,107	109,408	471,556
Female	44,625	30,845	90,593	163,818	123,550	35,554	114,110	603,095
Total	106,298	68,623	119,323	225,802	254,426	76,661	223,518	1,074,651
DAYS SINCE ADMISSION PER 1,000 POPULATION								
Male	1,312.2	441.3	470.2	705.2	1,968.1	3,952.6	5,416.2	1,245.2
Female	991.7	378.9	1,586.6	1,874.3	1,970.5	3,261.8	5,004.8	1,642.0
Total	1,155.4	410.9	1,009.5	1,288.1	1,969.2	3,599.1	5,198.1	1,440.6
AVERAGE STAY OF SEPARATIONS								
Male	8.9	6.3	8.8	11.1	14.9	17.8	17.6	12.1
Female	8.9	5.9	5.8	7.2	13.3	16.7	19.4	9.2
Total	8.9	6.2	6.4	8.0	14.2	17.3	18.5	10.3
POPULATION ⁽²⁾ (In thousands)								
Male	47.0	85.6	61.1	87.9	66.5	10.4	20.2	378.7
Female	45.0	81.4	57.1	87.4	62.7	10.9	22.8	367.3
Total	92.0	167.0	118.2	175.3	129.2	21.3	43.0	746.0

(1) Excludes newborns, and excluding out-of-province hospitalization.

(2) Derived from Dominion Bureau of Statistics Estimated Population by Sex and Age group, for Canada and Provinces, 1962.

TABLE A15
HOSPITALIZATION BY AGE AND SEX, NEW BRUNSWICK RESIDENT IN-PATIENTS⁽¹⁾, NEW BRUNSWICK, 1962

	0-4 ⁽²⁾	5-14	15-24	25-44	45-64	65-69	70+	Age Unknown	Total ⁽²⁾
SEPARATIONS									
Male	7,215	6,297	3,963	6,176	7,357	1,851	4,800	-	37,659
Female	5,407	5,645	13,257	22,156	8,515	1,728	4,651	-	61,359
Total	12,622	11,942	17,220	28,332	15,872	3,579	9,451	-	99,018
SEPARATIONS PER 1,000 POPULATION									
Male	177.3	82.4	80.7	91.1	148.0	231.4	320.0	-	122.8
Female	139.7	76.8	279.7	323.9	178.5	210.7	283.6	-	204.3
Total	159.0	79.7	178.4	208.0	163.0	220.9	301.0	-	163.1
PATIENT DAYS SINCE ADMISSION									
Male	70,565	49,128	34,887	63,323	110,795	37,000	98,759	-	464,457
Female	44,757	38,126	79,172	155,129	124,744	28,786	96,393	-	567,107
Total	115,322	87,254	114,059	218,452	235,539	65,786	195,152	-	1,031,564
DAYS SINCE ADMISSION PER 1,000 POPULATION									
Male	1,733.8	643.0	710.5	934.0	2,229.3	4,625.0	6,583.9	-	1,514.4
Female	1,156.5	518.7	1,670.3	2,268.0	2,615.2	3,510.5	5,877.6	-	1,888.5
Total	1,452.4	582.1	1,182.0	1,603.9	2,418.3	4,060.9	6,215.0	-	1,699.4
AVERAGE STAY OF SEPARATIONS									
Male	9.8	7.8	8.8	10.3	15.1	20.0	20.6	-	12.3
Female	8.3	6.8	6.0	7.0	14.6	16.7	20.7	-	9.2
Total	9.1	7.3	6.6	7.7	14.8	18.4	20.6	-	10.4
POPULATION ⁽³⁾ (In thousands)									
Male	40.7	76.4	49.1	67.8	49.7	8.0	15.0	-	306.7
Female	38.7	73.5	47.4	68.4	47.7	8.2	16.4	-	300.3
Total	79.4	149.9	96.5	136.2	97.4	16.2	31.4	-	607.0

(1) Includes "Provincial Plan" in-patients and also those not the responsibility of the "Provincial Plan", but excludes non-residents of the Province.

(2) Includes out-of-province hospitalization.

(3) Excludes newborns.

(4) Derived from Dominion Bureau of Statistics Estimated Population by Sex and Age Group, for Canada and Provinces, 1962.

TABLE A15
HOSPITALIZATION BY AGE AND SEX, IN-PATIENTS, (1) QUEBEC, 1962.

	0-4 (2)	5-14	15-24	25-44	45-64	65-69	70+	Age unknown	Total (2)
SEPARATIONS									
Male	50,632	48,206	32,511	62,481	62,394	11,201	21,178	-	288,603
Female	37,120	41,015	98,252	193,808	64,650	11,645	22,484	-	468,974
Total	87,752	89,221	130,763	256,289	127,044	22,846	43,662	-	757,577
SEPARATIONS PER 1,000 POPULATION									
Male	147.3	77.7	74.5	89.1	143.5	194.1	234.5	-	107.5
Female	112.9	69.0	224.4	271.6	146.8	188.1	214.3	-	174.9
Total	130.5	73.4	149.6	181.2	145.2	191.0	223.7	-	141.2
PATIENT DAYS SINCE ADMISSION									
Male	538,952	330,197	300,332	700,320	1,005,548	230,241	582,834	-	3,688,424
Female	410,244	271,978	671,827	1,629,279	1,088,603	272,007	757,756	-	5,101,694
Total	949,196	602,175	972,159	2,329,599	2,094,151	502,248	1,340,590	-	8,790,118
DAYS SINCE ADMISSION PER 1,000 POPULATION									
Male	1,568.1	532.1	688.2	999.0	2,313.2	3,990.3	6,454.4	-	1,374.1
Female	1,248.1	457.4	1,534.6	2,283.5	2,472.4	4,394.3	7,223.6	-	1,902.4
Total	1,411.7	495.6	1,112.1	1,646.9	2,393.3	4,199.4	6,867.8	-	1,638.1
AVERAGE STAY OF SEPARATIONS									
Male	10.6	6.8	9.2	11.2	16.1	20.6	27.5	-	12.8
Female	11.1	6.6	6.8	8.4	16.8	23.4	33.7	-	10.9
Total	10.8	6.7	7.4	9.1	16.5	22.0	30.7	-	11.6
POPULATION (3) (In thousands)									
Male	343.7	620.5	436.4	701.0	434.7	57.7	90.3	-	2,684.3
Female	328.7	594.6	437.8	713.5	440.3	61.9	104.9	-	2,681.7
Total	672.4	1,215.1	874.2	1,414.5	875.0	119.6	195.2	-	5,366.0

(1) Includes "Provincial Plan" in-patients, and also non-residents and others not the responsibility of the Provincial Plan. Includes out-of-province hospitalization.

(2) Excludes newborns.

(3) Derived from Dominion Bureau of Statistics Estimated Population by Sex and Age Group, for Canada and Provinces, 1962.

TABLE A15
HOSPITALIZATION BY AGE AND SEX, IN-PATIENTS⁽¹⁾, ONTARIO, 1962

	0-4 ⁽²⁾	5-14	15-24	25-44	45-64	65-69	70+	Age Unknown	Total ⁽²⁾
SEPARATIONS									
Male	64,658	57,075	30,885	69,960	84,197	19,395	43,619	60	369,849
Female	46,981	48,981	120,398	226,394	88,022	17,775	47,479	45	596,075
Total	111,639	106,056	151,283	296,354	172,219	37,170	91,098	105	965,924
SEPARATIONS PER 1,000 POPULATION									
Male	167.5	85.8	72.0	79.6	142.4	223.2	294.1	-	116.1
Female	127.9	77.3	284.2	260.3	151.8	186.3	253.2	-	188.8
Total	148.2	81.7	177.4	169.5	147.1	203.9	271.3	-	152.3
PATIENT DAYS SINCE ADMISSION									
Male	441,973	317,597	259,068	802,094	1,420,312	460,033	1,459,816	671	5,161,564
Female	326,539	254,585	757,397	1,807,674	1,453,163	441,538	2,301,295	479	7,342,670
Total	768,512	572,182	1,016,465	2,609,768	2,873,475	901,571	3,761,111	1,150	12,504,234
DAYS SINCE ADMISSION PER 1,000 POPULATION									
Male	1,144.7	477.7	603.7	912.9	2,402.4	5,293.8	9,843.7	-	1,620.5
Female	889.3	401.8	1,787.6	2,078.7	2,505.9	4,628.3	12,273.6	-	2,325.9
Total	1,020.2	440.6	1,191.9	1,492.8	2,453.7	4,945.5	11,200.4	-	1,971.7
AVERAGE STAY OF SEPARATIONS									
Male	6.8	5.6	8.4	11.5	16.9	23.7	33.5	11.2	14.0
Female	7.0	5.2	6.3	8.0	16.5	24.8	48.5	10.6	12.3
Total	6.9	5.4	6.7	8.8	16.7	24.3	41.3	11.0	12.9
POPULATION ⁽³⁾ (In thousands)									
Male	386.1	664.9	429.1	878.6	591.2	86.9	148.3	-	3,185.1
Female	367.2	633.6	423.7	869.6	579.9	95.4	187.5	-	3,156.9
Total	753.3	1,298.5	852.8	1,748.2	1,171.1	182.3	335.8	-	6,342.0

(1) Includes "Provincial Plan" in-patients and also non-residents and others not the responsibility of the "Provincial Plan". Includes out-of province hospitalization. Based on "claims processed" during year.

(2) Excludes newborns.

(3) Derived from Dominion Bureau of Statistics Estimated Population by Sex and Age Groups for Canada and Provinces, 1962.

TABLE A15

HOSPITALIZATION BY AGE AND SEX, MANITOBA RESIDENT IN-PATIENTS, (1) MANITOBA, 1962

	0-4(2)	5-14	15-24	25-44	45-64	65-69	70+	Total(2)
SEPARATIONS								
Male	11,872	9,239	5,656	10,386	13,896	3,713	11,559	66,321
Female	9,209	8,361	18,780	32,311	14,967	3,440	10,036	97,104
Total	21,081	17,600	24,436	42,697	28,863	7,153	21,595	163,425
SEPARATIONS PER 1,000 POPULATION								
Male	212.4	92.5	82.7	87.2	156.7	263.3	405.6	139.7
Female	172.5	87.3	284.1	274.5	175.1	245.7	359.7	210.9
Total	192.9	89.9	181.7	180.3	165.7	254.6	382.9	174.8
PATIENT DAYS SINCE ADMISSION								
Male	87,795	47,590	39,789	98,852	188,145	63,455	254,963	780,589
Female	69,385	41,576	108,589	224,584	182,640	60,978	234,323	922,075
Total	157,180	89,166	148,378	323,436	370,785	124,433	489,286	1,702,664
DAYS SINCE ADMISSION PER 1,000 POPULATION								
Male	1,570.6	476.4	581.7	830.0	2,121.1	4,500.4	8,946.1	1,644.7
Female	1,299.3	434.0	1,642.8	1,908.1	2,136.1	4,355.6	8,398.7	2,002.8
Total	1,438.1	455.6	1,103.2	1,365.9	2,128.5	4,428.2	8,675.3	1,821.0
AVERAGE STAY OF SEPARATIONS								
Male	7.4	5.2	7.0	9.5	13.5	17.1	22.1	11.8
Female	7.5	5.0	5.8	7.0	12.2	17.7	23.3	9.5
Total	7.5	5.1	6.1	7.6	12.8	17.4	22.7	10.4
POPULATION(3) (In thousands)								
Male	55.9	99.9	68.4	119.1	88.7	14.1	28.5	474.6
Female	53.4	95.8	66.1	117.7	85.5	14.0	27.9	460.4
Total	109.3	195.7	134.5	236.8	174.2	28.1	56.4	935.0

(1) Includes "Provincial Plan" in-patients and also those not the responsibility of the "Provincial Plan", but excludes non-residents of the Province, Includes out-of-province hospitalization.

(2) Excludes newborns.

(3) Derived from Dominion Bureau of Statistics Estimated Population by Sex and Age Group, for Canada and Provinces, 1962.

TABLE A15
HOSPITALIZATION BY AGE AND SEX, PROVINCIAL PLAN IN-PATIENTS, (1) SASKATCHEWAN, 1962

	0-4(2)	5-14	15-24	25-44	45-64	65-69	70+	Total(2)
SEPARATIONS								
Male	15,337	11,737	6,282	10,523	15,033	4,414	15,560	78,886
Female	11,701	10,730	20,483	35,399	17,590	4,042	11,883	111,828
Total	27,038	22,467	26,765	45,922	32,623	8,456	27,443	190,714
SEPARATIONS PER 1,000 POPULATION								
Male	262.2	112.6	92.2	91.8	170.8	298.2	480.2	164.1
Female	208.6	107.7	314.2	322.1	221.0	313.3	455.3	248.8
Total	235.9	110.2	200.8	204.6	194.6	305.3	469.1	205.1
PATIENT DAYS SINCE ADMISSION								
Male	121,573	65,391	45,497	91,522	183,326	66,175	274,542	848,026
Female	92,856	56,801	121,539	247,413	201,658	62,382	211,238	993,887
Total	214,429	122,192	167,036	338,935	384,984	128,557	485,780	1,841,913
DAYS SINCE ADMISSION PER 1,000 POPULATION								
Male	2,078.2	627.6	668.1	798.6	2,083.2	4,471.3	8,473.5	1,764.5
Female	1,655.2	570.3	1,864.1	2,251.3	2,533.4	4,835.8	8,093.4	2,211.6
Total	1,871.1	599.6	1,253.1	1,509.7	2,297.0	4,641.0	8,303.9	1,980.6
AVERAGE STAY OF SEPARATIONS								
Male	7.9	5.6	7.2	8.7	12.2	15.0	17.6	10.8
Female	7.9	5.3	5.9	7.0	11.5	15.4	17.8	8.9
Total	7.9	5.4	6.2	7.4	11.8	15.2	17.7	9.7
POPULATION(3) (In thousands)								
Male	58.5	104.2	68.1	114.6	88.0	14.8	32.4	480.6
Female	56.1	99.6	65.2	109.9	79.6	12.9	26.1	449.4
Total	114.6	203.8	133.3	224.5	167.6	27.7	58.5	930.0

(1) Includes out-of-province hospitalization, but excludes 532 separations involving 123,853 patient days from geriatric hospitals at Regina, Saskatoon and Melfort.

(2) Excludes newborns.

(3) Derived from Dominion Bureau of Statistics Estimated Population by Sex and Age Groups, for Canada and Provinces, 1962.

TABLE A15

HOSPITALIZATION BY AGE AND SEX, ALBERTA RESIDENT IN-PATIENTS⁽¹⁾, ALBERTA, 1962

	0-4 ⁽²⁾	5-14	15-24	25-44	45-64	65-69	70+	Total ⁽²⁾
SEPARATIONS								
Male	19,464	16,629	9,878	18,525	20,396	5,248	16,561	106,701
Female	15,379	14,877	34,050	54,036	22,032	4,374	12,860	157,608
Total	34,843	31,506	43,928	72,561	42,428	9,622	29,421	264,309
SEPARATIONS PER 1,000 POPULATION								
Male	205.3	108.0	100.5	97.3	172.1	305.1	482.8	150.9
Female	170.3	101.8	351.4	299.9	208.8	293.6	446.5	237.8
Total	188.2	105.0	225.0	195.8	189.4	299.8	466.3	192.9
PATIENT DAYS SINCE ADMISSION								
Male	142,861	99,227	74,672	169,311	302,765	104,706	527,070	1,420,612
Female	113,443	86,609	204,338	379,128	289,665	82,568	518,588	1,674,339
Total	256,304	185,836	279,010	548,439	592,430	187,274	1,045,658	3,094,951
DAYS SINCE ADMISSION PER 1,000 POPULATION								
Male	1,507.0	644.7	759.6	889.7	2,555.0	6,087.6	15,366.5	2,008.5
Female	1,256.3	592.8	2,108.8	2,103.9	2,745.6	5,541.5	18,006.5	2,526.5
Total	1,384.7	619.5	1,429.4	1,480.3	2,644.8	5,834.1	16,571.4	2,259.1
AVERAGE STAY OF SEPARATIONS								
Male	7.3	6.0	7.6	9.1	14.8	20.0	31.8	13.3
Female	7.4	5.8	6.0	7.0	13.1	18.9	40.3	10.6
Total	7.4	5.9	6.4	7.6	14.0	19.5	35.5	11.7
POPULATION ⁽³⁾ (In thousands)								
Male	94.8	153.9	98.3	190.3	118.5	17.2	34.3	707.3
Female	90.3	146.1	96.9	180.2	105.5	14.9	28.8	662.7
Total	185.1	300.0	195.2	370.5	224.0	32.1	63.1	1,370.0

(1) Includes "Provincial Plan" in-patients and also those not the responsibility of the "Provincial Plan", but excludes non-residents of the Province. Includes out-of-province hospitalization.

(2) Excludes newborns.

(3) Derived from Dominion Bureau of Statistics Estimated Population by Sex and Age Group, for Canada and Provinces, 1962.

TABLE A15
HOSPITALIZATION BY AGE AND SEX, PROVINCIAL PLAN IN-PATIENTS(1), BRITISH COLUMBIA, 1962

	0-4(2)	5-14	15-24	25-44	45-64	65-69	70+	Total(2)
SEPARATIONS								
Male	19,352	17,373	8,076	17,202	22,791	5,689	19,629	110,112
Female	14,998	14,963	31,432	56,890	25,507	4,922	15,560	164,272
Total	34,350	32,336	39,508	74,092	48,298	10,611	35,189	274,384
SEPARATIONS PER 1,000 POPULATION								
Male	200.1	102.7	73.3	78.1	140.2	231.3	329.3	130.6
Female	162.1	92.4	293.2	262.3	165.1	192.3	271.6	201.3
Total	181.6	97.7	181.7	169.5	152.3	211.4	301.0	165.4
PATIENT DAYS SINCE ADMISSION								
Male	149,733	102,327	59,193	152,744	296,666	97,165	385,003	1,242,831
Female	118,064	83,053	193,919	414,068	311,000	79,091	300,947	1,500,142
Total	267,797	185,380	253,112	566,812	607,666	176,256	685,950	2,742,973
DAYS SINCE ADMISSION PER 1,000 POPULATION								
Male	1,548.4	605.1	537.1	693.7	1,824.5	3,949.8	6,459.8	1,474.3
Female	1,276.4	512.7	1,808.9	1,909.0	2,012.9	3,089.5	5,252.1	1,838.4
Total	1,415.4	559.9	1,164.3	1,296.8	1,916.3	3,511.1	5,867.8	1,653.4
AVERAGE STAY OF SEPARATIONS								
Male	7.7	5.9	7.3	8.9	13.0	17.1	19.6	11.3
Female	7.9	5.6	6.2	7.3	12.2	16.1	19.3	9.1
Total	7.8	5.7	6.4	7.6	12.6	16.6	19.5	10.0
POPULATION(3) (in thousands)								
Male	96.7	169.1	110.2	220.2	162.6	24.6	59.6	843.0
Female	92.5	162.0	107.2	216.9	154.5	25.6	57.3	816.0
Total	189.2	331.1	217.4	437.1	317.1	50.2	116.9	1,659.0

(1) Excludes out-of-province hospitalization.

(2) Excludes newborns.

(3) Derived from Dominion Bureau of Statistics Estimated Population by Sex and Age Group, for Canada and Provinces, 1962.

TABLE A15
HOSPITALIZATION BY AGE AND SEX, IN-PATIENTS⁽¹⁾, YUKON, 1962

	0-4(2)	5-14	15-24	25-44	45-64	65-69	70+	Age Unknown	Total(2)
SEPARATIONS									
Male	414	163	152	419	267	33	110	3	1,561
Female	309	159	444	868	176	24	53	6	2,039
Total	723	322	596	1,287	443	57	163	9	3,600
SEPARATIONS PER 1,000 POPULATION									
Male	318.5	101.9	152.0	139.7	222.5	330.0	550.0	-	185.8
Female	257.5	106.0	555.0	394.5	220.0	240.0	530.0	-	308.9
Total	289.2	103.9	331.1	247.5	221.5	285.0	543.3	-	240.0
PATIENT DAYS SINCE ADMISSION									
Male	3,655	1,031	1,116	3,579	2,888	277	1,884	59	14,489
Female	2,576	1,015	2,901	6,147	1,761	225	780	83	15,488
Total	6,231	2,046	4,017	9,726	4,649	502	2,664	142	29,977
DAYS SINCE ADMISSION PER 1,000 POPULATION									
Male	2,811.5	644.4	1,116.0	1,193.0	2,406.7	2,770.0	9,420.0	-	1,724.9
Female	2,146.7	676.7	3,626.3	2,794.1	2,201.2	2,250.0	7,800.0	-	2,346.7
Total	2,492.4	660.0	2,231.7	1,870.4	2,324.5	2,510.0	8,880.0	-	1,998.5
AVERAGE STAY OF SEPARATIONS									
Male	8.8	6.3	7.3	8.5	10.8	8.4	17.1	19.7	9.3
Female	8.3	6.4	6.5	7.1	10.0	9.4	14.7	13.8	7.6
Total	8.6	6.4	6.7	7.6	10.5	8.8	16.3	15.8	8.3
POPULATION⁽³⁾ (In thousands)									
Male	1.3	1.6	1.0	3.0	1.2	0.1	0.2(4)	-	8.4
Female	1.2	1.5	0.8	2.2	0.8	0.1	(4)	-	6.6
Total	2.5	3.1	1.8	5.2	2.0	0.2	0.2(4)	-	15.0

(1) Includes "Provincial Plan", in-patients, and also non-residents and others not the responsibility of the Provincial Plan. Includes out-of-territory hospitalization.

(2) Excludes newborns.

(3) Derived from Dominion Bureau of Statistics, Estimated Population by Sex and Age Group, for Canada and Provinces, 1962.

(4) 1961 Census Population (M = 0.2, F = 0.1, and T = 0.3) used for rate calculations.

TABLE A15
HOSPITALIZATION BY AGE AND SEX, TERRITORIAL PLAN IN-PATIENTS,⁽¹⁾ NORTHWEST TERRITORIES, 1962

	0-4 ⁽²⁾	5-14	15-24	25-44	45-64	65-69	70+	Age Unknown	Total ⁽²⁾
SEPARATIONS									
Male	1,128	436	253	420	328	50	101	-	2,716
Female	891	403	731	1,239	269	31	72	4	3,640
Total	2,019	839	984	1,659	597	81	173	4	6,356
SEPARATIONS PER 1,000 POPULATION									
Male	512.7	150.3	120.5	102.4	192.9	250.0	1,010.0	-	204.2
Female	424.3	143.9	430.0	442.5	244.5	310.0	720.0	-	340.2
Total	469.5	147.2	258.9	240.4	213.2	270.0	865.0	-	264.8
PATIENT DAYS SINCE ADMISSION									
Male	10,933	4,815	2,441	4,461	4,493	767	1,808	-	29,718
Female	8,885	4,056	5,566	9,586	3,881	300	1,059	70	33,403
Total	19,818	8,871	8,007	14,047	8,374	1,067	2,867	70	63,121
DAYS SINCE ADMISSION PER 1,000 POPULATION									
Male	4,969.5	1,660.3	1,162.4	1,088.0	2,642.9	3,835.0	18,080.0	-	2,234.4
Female	4,231.0	1,448.6	3,274.1	3,423.6	3,528.2	3,000.0	10,590.0	-	3,121.8
Total	4,608.8	1,556.3	2,107.1	2,035.8	2,990.7	3,556.7	14,335.0	-	2,630.0
AVERAGE STAY OF SEPARATIONS									
Male	9.7	11.0	9.6	10.6	13.7	15.3	17.9	-	10.9
Female	10.0	10.1	7.6	7.7	14.4	9.7	14.7	17.5	9.2
Total	9.8	10.6	8.1	8.5	14.0	13.2	16.6	17.5	9.9
POPULATION ⁽³⁾ (In thousands)									
Male	2.2	2.9	2.1	4.1	1.7	0.2	0.1	-	13.3
Female	2.1	2.8	1.7	2.8	1.1	0.1	0.1	-	10.7
Total	4.3	5.7	3.8	6.9	2.8	0.3	0.2	-	24.0

(1) Includes out-of-territories hospitalization.

(2) Excludes newborns.

(3) Derived from Dominion Bureau of Statistics Estimated Population by Sex and Age Group, for Canada and Provinces, 1962.

TABLE A16

SEPARATIONS BY LENGTH OF STAY FOR BOTH SEXES AND ALL AGES⁽¹⁾, PROVINCIAL PLAN IN-PATIENTS⁽²⁾, BY PROVINCE, 1962

Length of Stay (in days)	Number of Separations								Total ⁽³⁾
	New- foundland	Prince Edward Is., Brunswick	Quebec	Ontario	Manitoba	Saskat- chewan.	Alberta	British Columbia	Northwest Territories
1	4,078	1,134	71,136	99,293	12,307	14,552	22,937	16,321	451
2	5,017	1,414	51,298	91,847	21,301	22,398	32,830	38,137	606
3	6,591	1,674	47,563	70,179	14,215	17,003	24,463	24,000	560
4	6,305	1,370	61,848	73,493	14,151	16,212	22,890	20,427	584
5	5,388	1,979	76,567	93,969	16,924	18,287	24,934	23,505	666
6	3,894	1,922	62,253	83,789	14,713	17,218	23,418	23,982	542
7	3,082	1,423	50,854	66,401	10,637	13,620	20,739	20,656	491
8	2,418	1,108	38,689	47,649	7,710	9,852	14,857	15,159	379
9	2,063	815	32,220	37,585	6,011	7,749	10,839	11,679	289
10	1,757	677	27,545	31,480	5,171	6,394	8,397	9,589	238
11 - 14	4,780	1,784	81,327	86,943	13,679	17,162	20,978	24,602	596
15 - 19	3,424	1,094	57,408	57,985	8,693	10,690	12,969	15,700	360
20 - 29	3,252	918	53,983	57,873	8,582	9,863	11,177	15,015	284
30 - 59	2,663	693	33,919	47,699	6,698	7,330	8,450	11,764	214
60+	1,028	251	10,967	19,739	2,634	2,384	4,431	3,848	92
Total	55,740	18,256	757,577	965,924	163,426	190,714	264,309	274,384	6,352
									2,796,232
	Percentage Distribution								
	1	2	3	4	5	6	7	8	9
1	7.3	6.2	9.4	10.3	7.5	7.6	8.7	5.9	7.1
2	9.0	7.7	6.8	9.5	13.0	11.7	12.4	13.9	9.5
3	11.8	9.2	6.3	7.3	8.7	8.9	9.3	8.7	8.8
4	11.3	7.5	8.2	7.6	8.7	8.5	8.7	7.4	9.2
5	9.7	10.8	10.1	9.7	10.4	9.6	9.4	8.6	10.5
6	7.0	10.5	8.2	8.7	9.0	9.0	8.9	8.7	8.5
7	5.5	7.8	6.7	6.9	6.5	7.1	7.8	7.5	7.7
8	4.3	6.1	5.1	4.9	4.7	5.2	5.6	5.5	6.0
9	3.7	4.5	4.3	3.9	3.7	4.1	4.1	4.3	4.5
10	3.2	3.7	3.6	3.3	3.2	3.4	3.2	3.5	3.7
11 - 14	8.6	9.8	10.7	9.0	8.4	9.0	7.9	9.0	9.4
15 - 19	6.1	6.0	7.6	6.0	5.3	5.6	4.9	5.7	5.7
20 - 29	5.8	5.0	7.1	6.0	5.3	5.2	4.2	5.5	4.5
30 - 59	4.8	3.8	4.5	4.9	4.1	3.8	3.2	4.3	3.4
60+	1.8	1.4	1.4	2.0	1.6	1.2	1.7	1.4	1.4
Total	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0

(1) Excludes newborns.

(2) Prince Edward Island, New Brunswick, Manitoba and Alberta also include non-insured residents of the Province. Quebec and Ontario include both resident and non-resident non-insured in-patients.

(3) Excludes Nova Scotia and Yukon Territory.

TABLE A17
PATIENT DAYS OF SEPARATIONS BY LENGTH OF STAY, FOR BOTH SEXES AND ALL AGES,⁽¹⁾
PROVINCIAL PLAN IN-PATIENTS,⁽²⁾ BY PROVINCE, 1962

Length of Stay (in days)	Number of Patient Days of Separations										Total ⁽³⁾
	New- foundland	Prince Edward Is.	New Brunswick	Quebec	Ontario	Manitoba	Saskat- chewan	Alberta	British Columbia	Northwest Territories	
1	4,078	1,134	6,976	71,136	99,295	12,307	14,552	22,937	16,321	451	249,187
2	10,034	2,828	18,726	102,596	183,695	42,602	44,796	65,660	76,280	1,212	548,429
3	19,773	5,055	25,338	142,689	210,542	42,645	51,009	73,389	71,973	1,680	644,093
4	25,220	5,480	36,532	247,392	293,972	56,604	64,848	91,560	81,683	2,336	905,627
5	26,940	9,895	48,920	382,835	469,856	84,620	91,435	124,670	117,433	3,330	1,359,934
6	23,364	11,532	52,332	373,518	502,734	88,278	103,308	140,508	143,811	3,252	1,442,637
7	21,774	9,947	50,455	355,978	464,807	74,454	95,340	143,173	144,489	3,437	1,365,834
8	19,344	8,864	44,332	309,512	381,192	61,680	78,816	118,856	121,163	3,142	1,146,921
9	18,567	7,335	39,672	289,980	338,274	54,099	69,741	97,331	105,054	2,601	1,022,874
10	17,719	6,770	35,520	275,450	314,800	51,710	63,940	83,970	95,807	2,380	948,066
11 - 14	59,004	21,801	120,520	1,004,995	1,071,748	169,043	211,348	262,490	302,757	7,354	3,231,060
15 - 19	57,893	18,243	103,988	961,818	971,536	145,061	178,890	216,608	263,046	5,888	2,922,971
20 - 29	77,647	21,800	130,495	1,281,223	1,378,046	203,861	233,760	265,292	356,845	6,709	3,955,678
30 - 59	106,405	27,555	151,120	1,345,930	1,906,198	267,655	291,959	339,052	467,519	8,682	4,912,075
60+	121,447	31,356	127,578	1,645,066	3,917,539	348,045	248,171	1,047,235	378,792	10,597	7,875,826
Total	609,209	189,595	992,504	8,790,118	12,504,234	1,702,564	1,841,913	3,094,951	2,742,973	63,051	32,531,212

Length of Stay (in days)	Percentage Distribution										Total ⁽³⁾
	New- foundland	Prince Edward Is.	New Brunswick	Quebec	Ontario	Manitoba	Saskat- chewan	Alberta	British Columbia	Northwest Territories	
1	0.7	0.6	0.7	0.8	0.8	0.7	0.8	0.7	0.6	0.7	0.8
2	1.6	1.5	1.9	1.2	1.5	2.5	2.4	2.1	2.8	1.9	1.7
3	3.2	2.7	2.6	1.6	1.7	2.5	2.8	2.4	2.6	2.7	2.0
4	4.1	2.9	3.7	2.8	2.4	3.8	3.5	3.0	3.0	3.7	2.8
5	4.4	5.2	4.9	4.4	3.8	5.0	5.0	4.0	4.3	5.3	4.2
6	3.8	6.1	5.3	4.2	4.0	5.2	5.6	4.5	5.2	5.2	4.4
7	3.6	5.2	5.1	4.0	3.7	4.4	5.2	4.7	5.3	5.5	4.2
8	3.2	4.7	4.5	3.5	3.0	3.6	4.3	3.8	4.4	5.0	3.5
9	3.0	3.9	4.0	3.3	2.7	3.2	3.8	3.2	3.8	4.1	3.1
10	2.9	3.6	3.6	3.1	2.5	3.0	3.5	2.7	3.5	3.8	2.9
11 - 14	9.7	11.5	12.1	11.4	8.6	9.9	11.5	8.5	11.0	11.7	9.9
15 - 19	9.5	9.6	10.5	10.9	7.8	8.5	9.7	7.0	9.6	9.3	9.0
20 - 29	12.7	11.5	13.1	14.6	11.0	12.0	12.7	8.6	13.0	10.6	12.2
30 - 59	17.5	14.5	15.2	15.3	15.2	15.7	15.8	11.0	17.0	13.8	15.1
60+	19.9	16.5	12.9	18.7	31.3	20.4	13.5	33.8	13.8	16.8	24.2
Total	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0

(1) Excludes Newborns.

(2) Prince Edward Island, New Brunswick, Manitoba and Alberta also include non-insured residents of the Province. Quebec and Ontario include both resident and non-resident non-insured in-patients.

(3) Excludes Nova Scotia and Yukon Territory.

SEPARATION RATES PER THOUSAND POPULATION BY PRIMARY DIAGNOSIS ACCORDING TO THE CANADIAN LIST OF 98 DIAGNOSES, ADULT AND CHILD IN-PATIENTS INSURED BY PROVINCIAL PLANS⁽¹⁾, BY PROVINCE, 1962

Canadian List Number and Diagnosis	Prince Edward Island	Nova Scotia	Quebec	Ontario	Manitoba	Saskat- chewan	Alberta	British Columbia	Yukon	Northwest Terri- tories	Total ⁽²⁾
ALL CAUSES (1-94) ⁽³⁾	171.5	140.7	140.1	151.5	174.1	204.3	190.9	165.0	238.2	263.3	156.3
I INFECTIVE AND PARASITIC DISEASES											
1. Tuberculosis, all forms	2.6	1.5	3.1	1.7	3.6	3.0	3.3	2.4	8.9	25.6	2.5
2. Poliomyelitis and encephalitis	0.3	0.2	0.3	0.1	0.3	0.1	0.2	0.2	0.7	3.1	0.2
3. Infectious hepatitis	0.2	0.1	0.1	0.1	0.2	0.1	0.2	0.2	0.1	0.1	0.1
4. Other diseases attributable to viruses	0.1	0.2	0.7	0.3	0.4	0.3	0.6	0.5	4.1	5.3	0.5
5. Other infective, bacterial, spirochaetal ricketsial or parasitic diseases	0.9	0.4	1.0	0.5	1.5	1.0	1.0	0.7	2.1	8.5	0.8
	1.0	0.7	0.9	0.6	1.2	1.4	1.3	0.8	1.9	8.7	0.9
II NEOPLASMS											
6. Malignant neoplasm of buccal cavity and pharynx	9.4	8.7	6.7	8.6	9.0	9.6	8.4	10.1	4.7	4.2	8.2
7. Malignant neoplasm of stomach	0.2	0.2	0.1	0.1	0.1	0.2	0.1	0.1	0.1	0.1	0.1
8. Malignant neoplasm of large intestine, except rectum	0.4	0.3	0.2	0.2	0.4	0.4	0.3	0.3	0.1	0.2	0.2
9. Malignant neoplasm of rectum	0.5	0.5	0.2	0.4	0.5	0.4	0.3	0.4	0.3	-	0.3
10. Malignant neoplasm of bronchus, trachea and lung, primary and unspecified as to whether primary or secondary	0.3	0.2	0.1	0.2	0.3	0.3	0.2	0.3	0.1	0.1	0.2
11. Malignant neoplasm of breast	0.2	0.3	0.2	0.4	0.4	0.4	0.3	0.5	0.1	0.04	0.3
12. Malignant neoplasm of cervix uteri	0.7	0.6	0.4	0.6	0.6	0.6	0.4	0.7	0.1	0.2	0.5
13. Malignant neoplasm of uterus other than of cervix uteri	0.7	0.6	0.3	0.3	0.4	0.2	0.3	0.6	0.2	0.2	0.3
14. Malignant neoplasm of ovary, Fallopian tube and broad ligament	0.3	0.1	0.1	0.2	0.2	0.2	0.1	0.2	-	0.1	0.1
15. Malignant neoplasm of prostate	0.2	0.1	0.1	0.1	0.2	0.1	0.1	0.1	0.1	-	0.1
16. Malignant neoplasm of kidney, bladder and other urinary organs	0.6	0.3	0.1	0.3	0.5	0.6	0.4	0.5	-	0.04	0.3
17. Leukaemia and aleukaemia	0.7	0.4	0.1	0.4	0.3	0.4	0.3	0.6	0.1	0.1	0.3
	0.2	0.1	0.1	0.2	0.3	0.3	0.3	0.2	0.1	0.1	0.2

TABLE A18 (Cont'd.)

Canadian List Number and Diagnosis	Prince Edward Island	Nova Scotia	Quebec	Ontario	Manitoba	Saskat- chewan	Alberta	British Columbia	Yukon	Northwest Terri- tories	Total(2)
II NEOPLASMS (Cont'd)											
18. Other malignant neoplasms and neoplasms of lymphatic and haematopoietic tissue	1.7	1.4	0.8	1.4	1.5	1.3	1.3	1.2	0.3	0.6	1.2
19. Benign neoplasm of uterus	0.8	1.0	1.0	1.3	1.1	1.8	1.5	1.7	0.6	0.6	1.3
20. Benign neoplasm of ovary	0.3	0.4	0.5	0.5	0.3	0.5	0.4	0.4	0.5	0.4	0.5
21. Benign neoplasms (excluding uterus and ovary) and neoplasms of unspecified nature	1.5	1.9	2.3	2.1	2.0	1.9	2.2	2.2	2.0	1.5	2.1
III ALLERGIC, ENDOCRINE SYSTEM, METABOLIC AND NUTRITIONAL DISEASES											
22. Asthma	5.6	5.2	3.8	3.5	4.3	6.2	5.9	4.7	3.3	4.2	4.1
23. Other allergic disorders (excluding asthma)	1.5	0.9	0.5	0.9	1.2	1.8	1.2	1.7	0.5	1.4	0.9
24. Diseases of thyroid gland	0.3	0.3	0.4	0.3	0.4	0.6	0.5	0.3	0.3	0.8	0.3
25. Diabetes mellitus	0.4	1.3	0.7	0.5	0.5	0.8	1.0	0.6	0.9	0.3	0.7
26. Diseases of other endocrine glands	2.7	2.2	1.5	1.5	1.8	2.5	2.5	1.6	1.0	0.5	1.7
27. Avitaminoses and other metabolic diseases	0.4	0.2	0.2	0.1	0.1	0.2	0.2	0.1	-	0.3	0.2
	0.3	0.4	0.5	0.3	0.3	0.4	0.5	0.3	0.5	0.9	0.4
IV DISEASES OF THE BLOOD AND BLOOD-FORMING ORGANS											
28. Diseases of the blood and blood- forming organs	0.8	0.8	0.8	0.8	0.8	1.0	1.0	0.8	0.7	0.8	0.8
	0.8	0.8	0.8	0.8	0.8	1.0	1.0	0.8	0.7	0.8	0.8
V MENTAL, PSYCHONEUROTIC, AND PERSONALITY DISORDERS											
29. Psychoses	2.7	2.3	4.2	3.2	3.7	4.3	4.1	3.5	7.3	3.8	3.7
30. Psychoneurotic disorders	0.6	0.7	0.6	0.7	1.5	1.2	1.0	1.0	1.8	1.5	0.8
31. Disorders of character, behaviour and intelligence	0.8	1.1	2.9	1.8	1.5	2.4	2.4	1.8	3.2	1.8	2.2
	1.3	0.4	0.8	0.6	0.8	0.6	0.7	0.7	2.3	0.5	0.7

TABLE A18 (Cont'd.)

Canadian List Number and Diagnosis	Prince Edward Island	Nova Scotia	Quebec	Ontario	Manitoba	Saskat- chewan	Alberta	British Columbia	Yukon	Northwest Terri- tories	Total(2)
VI DISEASES OF THE NERVOUS SYSTEM AND SENSE ORGANS											
32. Vascular lesions affecting central nervous system	5.9	5.6	6.4	7.2	8.9	9.6	8.4	8.5	8.9	15.0	7.3
33. Inflammatory and other diseases of central nervous system	1.8	1.7	1.1	1.9	2.6	2.3	2.1	2.1	0.7	0.7	1.7
34. Diseases of nerves and peripheral ganglia	1.1	1.2	1.2	1.3	1.8	1.7	1.7	1.2	2.0	4.3	1.3
35. Diseases and conditions of the eye	0.7	0.3	0.6	0.5	0.5	0.7	0.7	0.5	0.5	0.5	0.5
36. Diseases of ear and mastoid process	0.8	1.5	1.8	2.1	2.2	2.2	2.1	2.4	2.3	5.0	2.0
	1.5	0.8	1.8	1.4	1.6	2.6	1.9	2.3	3.3	4.5	1.7
VII DISEASES OF THE CIRCULATORY SYSTEM											
37. Rheumatic fever and chronic rheumatic heart disease	19.3	10.7	9.6	11.9	13.5	17.4	13.0	13.8	10.4	8.5	11.8
38. Arteriosclerotic and degenerative heart disease	0.9	0.5	0.6	0.5	0.7	0.9	0.9	0.6	1.1	1.8	0.6
39. Other diseases of the heart	6.8	4.5	3.9	5.4	5.3	6.4	4.5	6.1	3.1	1.2	4.9
40. Hypertensive heart disease and other hypertensive disease	1.9	1.2	0.7	1.0	2.1	3.3	1.9	1.2	1.1	1.9	1.2
41. Diseases of arteries	2.7	1.2	1.1	1.0	1.3	2.3	1.5	1.2	1.3	0.7	1.2
42. Varicose veins of lower extremities	0.6	0.7	0.7	0.8	0.8	0.8	0.8	0.8	0.3	0.2	0.7
43. Haemorrhoids	1.5	0.8	0.6	1.1	1.0	1.2	1.2	1.5	0.8	0.4	1.0
44. Phlebitis and thrombophlebitis	3.1	0.6	1.0	1.0	1.0	1.1	1.0	1.2	1.3	0.5	1.0
45. Other diseases of the circulatory system	0.5	0.3	0.2	0.3	0.5	0.6	0.5	0.4	0.6	0.6	0.3
	1.2	0.8	0.8	0.8	0.7	0.9	0.8	0.8	0.8	1.1	0.8
VIII DISEASES OF THE RESPIRATORY SYSTEM											
46. Acute upper respiratory infections	32.2	20.3	18.9	22.9	29.5	38.0	34.4	29.0	48.3	72.2	24.4
47. Influenza	2.8	1.4	1.5	2.2	3.2	5.0	5.3	3.1	9.8	4.5	2.5
48. Pneumonia	1.7	1.1	0.6	0.6	1.9	3.2	2.8	1.3	0.9	2.4	1.1
49. Bronchitis	15.3	6.4	2.9	4.1	8.2	9.5	7.8	6.6	19.8	41.0	5.0
50. Hypertrophy of tonsils and adenoids	4.8	2.4	2.1	2.0	4.3	7.1	5.3	3.7	8.8	12.5	2.9
51. Other diseases of respiratory system	5.9	7.5	9.0	11.9	8.3	10.1	10.1	11.4	6.8	6.8	10.3
	1.8	1.4	2.7	2.1	3.4	3.0	3.1	2.8	2.1	5.1	2.5

TABLE A18 (Cont'd.)

Canadian List Number and Diagnosis	Prince Edward Island	Nova Scotia	Quebec	Ontario	Manitoba	Saskat- chewan	Alberta	British Columbia	Yukon	Northwest Terra- tories	Total(2)
IX DISEASES OF THE DIGESTIVE SYSTEM											
52. Diseases of teeth, and supporting structure	17.8	17.0	20.3	19.4	23.5	28.3	25.0	20.4	25.7	23.9	20.8
53. Ulcer of stomach, duodenum and jejunum	0.8	0.2	1.7	1.1	2.5	2.7	2.2	2.1	2.0	1.1	1.6
54. Gastritis, duodenitis and other disorders and diseases of the stomach and duodenum	3.0	2.4	2.6	2.2	2.3	3.2	2.6	2.6	2.0	1.4	2.4
55. Appendicitis	0.7	0.8	1.8	0.9	1.0	1.9	1.7	0.9	1.9	1.2	1.3
56. Hernia of abdominal cavity	3.1	3.3	2.8	3.2	2.9	3.8	3.6	2.3	3.0	2.2	3.0
57. Intestinal obstruction without mention of hernia	2.1	2.4	2.8	3.9	3.5	3.1	3.4	3.3	3.9	1.2	3.3
58. Gastro-enteritis and colitis, except ulcerative, age 4 weeks and over	0.6	0.5	0.3	0.6	0.7	0.8	0.8	0.7	0.8	0.3	0.5
59. Chronic enteritis and ulcerative colitis	2.5	2.1	1.9	2.0	4.0	4.9	4.1	2.6	5.4	11.2	2.5
60. Cirrhosis and other diseases of liver	0.7	0.7	0.5	0.6	0.7	0.8	0.6	0.7	0.2	0.3	0.6
61. Diseases of gallbladder and pancreas	0.2	0.3	0.6	0.4	0.3	0.2	0.3	0.3	0.5	0.6	0.4
62. Other diseases of digestive system	3.0	2.6	3.5	2.9	3.8	4.7	3.8	2.8	3.2	1.7	3.3
	1.3	1.8	1.7	1.7	1.9	2.1	2.0	1.9	2.8	2.5	1.8
X DISEASES OF THE GENITO-URINARY SYSTEM											
63. Nephritis and nephrosis	12.4	11.3	9.9	13.1	11.6	16.2	13.5	14.7	19.0	12.2	12.3
64. Infections of kidney	0.6	0.3	0.4	0.3	0.4	0.6	0.5	0.4	0.7	0.7	0.4
65. Calculi of kidney, ureter and other parts of urinary system	1.6	0.9	0.7	1.0	1.3	1.8	1.6	1.4	1.7	2.4	1.0
66. Other diseases of urinary system	1.1	1.0	0.7	0.9	0.7	1.3	0.9	1.1	0.8	0.3	0.9
67. Hyperplasia of prostate	1.9	1.6	1.3	1.6	1.6	2.8	1.9	2.6	1.8	1.2	1.7
68. Redundant prepuce and phimosis	1.0	1.0	0.5	0.9	1.1	1.5	1.1	1.6	0.7	0.4	0.9
69. Diseases of ovary, Fallopian tube and parametrium, and infective disease of uterus, vagina and vulva	0.4	0.6	0.8	0.5	0.4	0.6	0.5	0.4	0.7	0.8	0.6
70. Uterovaginal prolapse	1.8	1.5	1.8	2.2	1.2	1.6	1.5	1.4	3.8	1.4	1.8
71. Disorders of menstruation	0.9	0.9	0.8	1.1	0.9	1.1	0.9	1.1	0.7	0.5	1.0
72. Other diseases of genital organs	1.1	1.9	1.3	1.9	2.0	2.4	2.3	2.1	3.7	2.0	1.8
	2.1	1.6	1.6	2.7	1.9	2.7	2.4	2.7	4.5	2.6	2.2

TABLE A18 (Cont'd.)

Canadian List Number and Diagnosis	Prince Edward Island	Nova Scotia	Quebec	Ontario	Manitoba	Saskat- chewan	Alberta	British Columbia	Yukon	Northwest Terri- tories	Total(2)
XI DELIVERIES AND COMPLICATIONS OF PREGNANCY, CHILDBIRTH AND THE PUERPERIUM											
73. Complications of pregnancy	35.3	32.7	31.8	32.7	32.2	34.2	36.9	30.3	48.9	46.2	32.6
74. Abortion	5.0	4.3	3.4	4.3	4.7	5.9	4.9	4.7	8.1	7.8	4.2
75. Delivery without mention of complications	3.3	2.4	3.1	3.2	2.9	2.9	3.5	2.9	5.0	4.6	3.1
76. Delivery with specified complications	26.6	24.0	23.8	22.5	22.0	22.9	26.7	20.0	34.0	30.2	23.1
77. Complications of the puerperium	0.3	1.9	1.1	2.7	2.3	2.0	1.3	2.3	1.1	2.7	1.9
	0.1	0.1	0.4	0.1	0.3	0.5	0.4	0.3	0.7	0.8	0.2
XII DISEASES OF THE SKIN AND CELLULAR TISSUE											
78. Infection of skin and subcutaneous tissue	3.6	3.0	3.8	3.0	3.9	4.1	4.3	3.1	8.2	10.3	3.5
79. Other diseases of skin and subcutaneous tissue	1.9	1.4	1.7	1.5	2.1	2.0	2.5	1.7	5.5	8.0	1.7
	1.7	1.5	2.1	1.5	1.7	2.1	1.8	1.4	2.7	2.3	1.8
XIII DISEASES OF BONES AND ORGANS OF MOVEMENT											
80. Arthritis and rheumatism, except rheumatic fever	5.6	3.9	4.6	4.9	5.8	7.1	7.4	5.3	5.2	4.4	5.2
81. Displacement of intervertebral disc	1.7	1.6	1.8	1.9	2.3	3.4	3.2	1.7	2.0	1.9	2.0
82. Other diseases of bones and organs of movement	2.2	0.9	0.8	1.0	1.2	1.3	1.3	1.3	1.6	0.6	1.0
	1.7	1.5	2.0	2.1	2.2	2.4	2.9	2.3	1.6	1.8	2.1
XIV CONGENITAL MALFORMATIONS											
83. Congenital malformations	1.3	1.6	1.3	1.4	1.5	1.3	1.8	1.7	0.7	2.3	1.4
	1.3	1.6	1.3	1.4	1.5	1.3	1.8	1.7	0.7	2.3	1.4
XV CERTAIN DISEASES OF EARLY INFANCY											
84. Certain diseases of early infancy	0.7	1.3	0.9	0.5	0.5	1.3	0.6	0.4	1.2	3.9	0.7
	0.7	1.3	0.9	0.5	0.5	1.3	0.6	0.4	1.2	3.9	0.7

TABLE A18 (Cont'd.)

Canadian List Number and Diagnosis	Prince Edward Island	Nova Scotia	Quebec	Ontario	Manitoba	Saskat- chewan	Alberta	British Columbia	Yukon	Northwest Terri- tories	Total(2)
XVI SYMPTOMS, SENILITY AND ILL-DEFINED CONDITIONS											
85. Symptoms, senility and ill-defined conditions	3.6	3.9	3.2	3.2	6.0	5.4	4.0	2.1	6.9	9.7	3.5
	3.6	3.9	3.2	3.2	6.0	5.4	4.0	2.1	6.9	9.7	3.5
XVII ACCIDENTS, POISONINGS, AND VIOLENCE (NATURE OF INJURY)											
86. Fracture of or involving skull or face bones and head injury, except open wounds, contusion and haematoma of scalp	12.8	10.8	10.9	13.5	15.9	17.5	18.7	14.5	30.1	16.1	13.4
87. Fracture of spine and trunk	1.8	1.6	1.6	2.0	1.8	1.9	2.0	2.1	2.4	1.9	1.9
88. Fracture of upper limb	1.0	0.6	0.6	0.8	0.8	0.9	0.9	0.8	1.3	0.5	0.7
89. Fracture of femur	2.0	1.5	1.4	1.8	2.2	2.6	2.6	2.0	2.7	1.4	1.8
90. Other fractures of lower limbs (excluding femur)	0.9	0.8	0.6	0.9	1.0	0.8	0.8	1.0	0.8	0.5	0.8
91. Dislocation without fracture, and sprains and strains of joints and adjacent muscles	1.5	1.0	1.1	1.3	1.5	1.5	1.7	1.2	3.0	1.2	1.3
92. Internal injury of chest, abdomen and pelvis	0.6	0.6	0.8	1.2	1.3	1.5	3.1	1.2	5.4	1.6	1.2
93. Burns	0.1	0.2	0.1	0.1	0.2	0.2	0.3	0.2	0.5	0.3	0.2
94. Other and unspecified effects of accidents, poisonings and violence	0.6	0.6	0.4	0.5	0.8	0.8	0.8	0.6	2.0	1.6	0.6
	4.2	4.0	4.3	4.7	6.3	7.3	6.5	5.3	12.0	7.0	5.0

(1) The data relate mainly to provincial hospital insurance plan in-patients hospitalized within or outside the respective provinces. For information on variations and exceptions in particular provinces, see footnotes to Table A15.

(2) Excludes Newfoundland and New Brunswick.

(3) Excludes X SUPPLEMENTARY CLASSIFICATIONS FOR SPECIAL ADMISSIONS, LIVEBIRTHS AND STILLBIRTHS (95-98).

Source: Data supplied to Department of National Health and Welfare by Provincial Plans.

TABLE A19

PERCENTAGE DISTRIBUTION OF SEPARATIONS BY PRIMARY DIAGNOSIS ACCORDING TO THE CANADIAN LIST OF 98 DIAGNOSES, ADULT AND CHILD INPATIENTS INSURED BY PROVINCIAL PLANS⁽¹⁾ BY PROVINCE, 1962

Canadian List Number and Diagnosis	Prince Edward Island	Nova Scotia	Quebec	Ontario	Manitoba	Saskat- chewan	Alberta	British Columbia	Yukon	Northwest Terri- tories	Total ⁽²⁾
ALL CAUSES (1-94) ⁽³⁾	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0
I INFECTIVE AND PARASITIC DISEASES	1.5	1.1	2.2	1.1	2.1	1.5	1.7	1.4	3.8	9.7	1.6
1. Tuberculosis all forms	0.2	0.2	0.2	0.1	0.2	0.1	0.1	0.1	0.3	1.2	0.1
2. Poliomyelitis and encephalitis	0.1	0.1	0.1	0.1	0.1	0.1	0.1	0.1	0.03	0.03	0.1
3. Infectious hepatitis	0.1	0.1	0.5	0.2	0.2	0.2	0.3	0.3	1.7	2.0	0.3
4. Other diseases attributable to viruses	0.5	0.3	0.7	0.3	0.9	0.5	0.5	0.4	0.9	3.2	0.5
5. Other infective, bacterial, spirochaetal ricketsial or parasitic diseases	0.6	0.5	0.7	0.4	0.7	0.7	0.7	0.5	0.8	3.3	0.6
II NEOPLASMS	5.5	6.2	4.8	5.7	5.2	4.7	4.4	6.1	2.0	1.6	5.3
6. Malignant neoplasm of buccal cavity and pharynx	0.1	0.2	0.1	0.1	0.1	0.1	0.1	0.1	0.1	0.1	0.1
7. Malignant neoplasm of stomach	0.2	0.2	0.1	0.2	0.2	0.2	0.1	0.2	0.1	0.1	0.2
8. Malignant neoplasm of large intestine, except rectum	0.3	0.4	0.2	0.3	0.3	0.2	0.2	0.2	0.1	-	0.2
9. Malignant neoplasm of rectum	0.2	0.2	0.1	0.1	0.2	0.1	0.1	0.2	0.1	0.03	0.1
10. Malignant neoplasm of bronchus, trachea & lung, primary & unspecified as to whether primary or secondary	0.1	0.2	0.1	0.2	0.3	0.2	0.2	0.3	0.03	0.02	0.2
11. Malignant neoplasm of breast	0.4	0.4	0.3	0.4	0.3	0.3	0.2	0.4	0.03	0.1	0.3
12. Malignant neoplasm of cervix uteri	0.4	0.4	0.2	0.2	0.2	0.1	0.1	0.4	0.1	0.1	0.2
13. Malignant neoplasm of uterus other than of cervix uteri	0.2	0.1	0.1	0.1	0.1	0.1	0.04	0.1	-	0.03	0.1
14. Malignant neoplasm of ovary, Fallopian tube and broad ligament	0.1	0.1	0.04	0.1	0.1	0.1	0.1	0.1	0.03	-	0.1
15. Malignant neoplasm of prostate	0.4	0.2	0.1	0.2	0.3	0.3	0.2	0.3	-	0.02	0.2
16. Malignant neoplasm of kidney, bladder and other urinary organs	0.4	0.3	0.1	0.3	0.2	0.2	0.2	0.3	0.1	0.03	0.2
17. Leukaemia and aleukaemia	0.1	0.1	0.1	0.1	0.2	0.1	0.1	0.1	0.03	0.03	0.1

TABLE A19 (Cont'd)

Canadian List Number and Diagnosis	Prince Edward Island	Nova Scotia	Quebec	Ontario	Manitoba	Saskat- chewan	Alberta	British Columbia	Yukon	Northwest Terri- tories	Total(2)
II NEOPLASMS (Cont'd)											
18. Other malignant neoplasms and neoplasms of lymphatic and haematopoietic tissue	1.0	1.0	0.6	0.9	0.9	0.7	0.7	0.8	0.1	0.2	0.8
19. Benign neoplasm of uterus	0.5	0.7	0.7	0.9	0.6	0.9	0.8	1.0	0.3	0.2	0.8
20. Benign neoplasm of ovary	0.2	0.3	0.4	0.3	0.2	0.3	0.2	0.3	0.2	0.1	0.3
21. Benign neoplasms (excluding uterus and ovary and neoplasms of unspecified nature)	0.9	1.3	1.6	1.4	1.2	0.9	1.2	1.3	0.8	0.6	1.4
III ALLERGIC, ENDOCRINE SYSTEM, METABOLIC AND NUTRITIONAL DISEASES											
22. Asthma	3.3	3.7	2.7	2.3	2.5	3.0	3.1	2.8	1.4	1.6	2.7
23. Other allergic disorders (excluding asthma)	0.9	0.6	0.4	0.6	0.7	0.9	0.7	1.0	0.2	0.5	0.6
24. Diseases of thyroid gland	0.2	0.2	0.3	0.2	0.2	0.3	0.3	0.2	0.1	0.3	0.2
25. Diabetes mellitus	0.2	0.9	0.5	0.3	0.3	0.4	0.5	0.4	0.4	0.1	0.4
26. Diseases of other endocrine glands	1.6	1.5	1.1	1.0	1.0	1.2	1.3	1.0	0.4	0.2	1.1
27. Avitaminoses and other metabolic diseases	0.2	0.1	0.1	0.1	0.1	0.1	0.1	0.1	-	0.1	0.1
	0.2	0.3	0.3	0.2	0.2	0.2	0.2	0.2	0.2	0.3	0.2
IV DISEASES OF THE BLOOD AND BLOOD-FORMING ORGANS											
28. Diseases of the blood and blood-forming organs	0.5	0.6	0.6	0.5	0.5	0.5	0.5	0.5	0.3	0.3	0.5
	0.5	0.6	0.6	0.5	0.5	0.5	0.5	0.5	0.3	0.3	0.5
V MENTAL, PSYCHONEUROTIC, AND PERSONALITY DISORDERS											
29. Psychoses	1.6	1.6	3.0	2.1	2.1	2.1	2.2	2.1	3.1	1.4	2.3
30. Psychoneurotic disorders	0.4	0.5	0.4	0.5	0.9	0.6	0.5	0.6	0.8	0.6	0.5
31. Disorders of character, behaviour and intelligence	0.4	0.8	2.0	1.2	0.8	1.2	1.3	1.1	1.4	0.7	1.4
	0.8	0.3	0.5	0.4	0.4	0.3	0.4	0.4	1.0	0.2	0.4

TABLE A19 (Cont'd)

Canadian List Number and Diagnosis	Prince Edward Island	Nova Scotia	Quebec	Ontario	Manitoba	Saskat- chewan	Alberta	British Columbia	Yukon	Northwest Terri- tories	Total
VI DISEASES OF THE NERVOUS SYSTEM AND SENSE ORGANS											
32. Vascular lesions affecting central nervous system	3.4	4.0	4.6	4.7	5.1	4.7	4.4	5.1	3.7	5.7	4.7
33. Inflammatory and other diseases of central nervous system	1.0	1.2	0.8	1.3	1.5	1.1	1.1	1.3	0.3	0.3	1.1
34. Diseases of nerves and peripheral ganglia	0.7	0.9	0.9	0.9	1.1	0.8	0.9	0.7	0.8	1.6	0.9
35. Diseases and conditions of the eye	0.4	0.2	0.4	0.3	0.3	0.4	0.4	0.3	0.2	0.2	0.3
36. Diseases of ear and mastoid process	0.5	1.1	1.3	1.4	1.3	1.1	1.1	1.5	1.0	1.9	1.3
	0.8	0.6	1.3	0.9	0.9	1.3	1.0	1.4	1.4	1.7	1.1
VII DISEASES OF THE CIRCULATORY SYSTEM											
37. Rheumatic fever and chronic rheumatic heart disease	11.2	7.6	6.8	7.9	7.7	8.5	6.8	8.3	4.4	3.2	7.6
38. Arteriosclerotic and degenerative heart disease	0.5	0.4	0.4	0.4	0.4	0.4	0.5	0.4	0.5	0.7	0.4
39. Other diseases of the heart	3.9	3.2	2.8	3.5	3.1	3.1	2.4	3.7	1.3	0.5	3.2
40. Hypertensive heart disease and other hypertensive disease	1.1	0.9	0.5	0.6	1.2	1.6	1.0	0.7	0.5	0.7	0.8
41. Diseases of arteries	1.6	0.9	0.8	0.7	0.8	1.1	0.8	0.7	0.5	0.3	0.8
42. Varicose veins of lower extremities	0.3	0.5	0.5	0.5	0.5	0.4	0.4	0.5	0.1	0.1	0.5
43. Haemorrhoids	0.9	0.6	0.4	0.8	0.6	0.6	0.6	0.9	0.3	0.1	0.6
44. Phlebitis and thrombophlebitis	1.8	0.5	0.7	0.7	0.6	0.5	0.5	0.7	0.6	0.2	0.7
45. Other diseases of the circulatory system	0.3	0.2	0.2	0.2	0.3	0.3	0.3	0.2	0.3	0.2	0.2
	0.7	0.6	0.6	0.5	0.4	0.4	0.4	0.5	0.3	0.4	0.5
VIII DISEASES OF THE RESPIRATORY SYSTEM											
46. Acute upper respiratory infections	18.8	14.5	13.5	15.1	16.9	18.6	18.0	17.6	20.3	27.4	15.6
47. Influenza	1.6	1.0	1.1	1.5	1.9	2.5	2.8	1.9	4.1	1.7	1.6
48. Pneumonia	1.0	0.8	0.4	0.4	1.1	1.6	1.5	0.8	0.4	0.9	0.7
49. Bronchitis	8.9	4.6	2.1	2.7	4.7	4.7	4.1	4.0	8.3	15.6	3.2
50. Hypertrophy of tonsils and adenoids	2.8	1.7	1.5	1.3	2.5	3.5	2.8	2.3	3.7	4.7	1.9
51. Other diseases of respiratory system	3.4	5.3	6.4	7.9	4.8	5.0	5.3	6.9	2.9	2.6	6.6
	1.1	1.0	2.0	1.4	2.0	1.5	1.6	1.7	0.9	1.9	1.6

TABLE A19 (Cont'd)

Canadian List Number and Diagnosis	Prince Edward Island	Nova Scotia	Quebec	Ontario	Manitoba	Saskat- chewan	Alberta	British Columbia	Yukon	Northwest Terri- tories	Total
IX DISEASES OF THE DIGESTIVE SYSTEM											
52. Diseases of teeth and supporting structure	10.4	12.1	14.5	12.8	13.5	13.8	13.1	12.3	10.8	9.1	13.3
53. Ulcer of stomach, duodenum and jejunum	0.4	0.2	1.2	0.7	1.4	1.3	1.2	1.3	0.8	0.4	1.0
54. Gastritis, duodenitis and other disorders and diseases of the stomach and duodenum	1.7	1.7	1.8	1.4	1.3	1.6	1.4	1.6	0.8	0.5	1.6
55. Appendicitis	0.4	0.5	1.3	0.6	0.6	0.9	0.9	0.6	0.8	0.5	0.8
56. Hernia of abdominal cavity	1.8	2.3	2.0	2.1	1.7	1.9	1.9	1.4	1.3	0.9	1.9
57. Intestinal obstruction without mention of hernia	1.2	1.7	2.0	2.5	2.0	1.5	1.8	2.0	1.7	0.5	2.1
58. Gastro-enteritis and colitis, except ulcerative, age 4 weeks and over	0.3	0.4	0.2	0.4	0.4	0.4	0.4	0.4	0.3	0.1	0.3
59. Chronic enteritis and ulcerative colitis	1.4	1.5	1.4	1.3	2.3	2.4	2.1	1.5	2.3	4.3	1.6
60. Cirrhosis and other diseases of liver	0.4	0.5	0.3	0.4	0.4	0.4	0.3	0.4	0.1	0.1	0.4
61. Diseases of gallbladder and pancreas	0.1	0.2	0.4	0.3	0.2	0.1	0.2	0.2	0.2	0.2	0.3
62. Other diseases of digestive system	1.7	1.8	2.5	1.9	2.2	2.3	2.0	1.7	1.3	0.7	2.1
	0.8	1.3	1.2	1.1	1.1	1.0	1.1	1.2	1.2	0.9	1.2
X DISEASES OF THE GENITO-URINARY SYSTEM											
63. Nephritis and nephrosis	7.2	8.0	7.1	8.7	6.7	7.9	7.1	8.9	8.0	4.6	7.9
64. Infections of kidney	0.4	0.2	0.3	0.2	0.2	0.3	0.2	0.2	0.3	0.3	0.2
65. Calculi of kidney, ureter and other parts of urinary system	0.9	0.6	0.5	0.6	0.8	0.9	0.8	0.9	0.7	0.9	0.7
66. Other diseases of urinary system	0.6	0.7	0.5	0.6	0.4	0.6	0.5	0.7	0.3	0.1	0.6
67. Hyperplasia of prostate	1.1	1.2	0.9	1.1	0.9	1.3	1.0	1.6	0.8	0.4	1.1
68. Redundant prepuce and phimosis	0.6	0.7	0.4	0.6	0.6	0.7	0.6	0.9	0.3	0.1	0.6
69. Diseases of ovary, Fallopian tube and perimetrium, and infective diseases of uterus, vagina and vulva	0.2	0.5	0.6	0.4	0.2	0.3	0.3	0.3	0.3	0.3	0.4
70. Uterovaginal prolapse	1.0	1.1	1.3	1.5	0.7	0.8	0.8	0.8	1.6	0.5	1.2
71. Disorders of menstruation	0.5	0.6	0.6	0.7	0.5	0.5	0.4	0.7	0.3	0.2	0.6
72. Others diseases of genital organs	0.6	1.4	0.9	1.2	1.2	1.2	1.2	1.3	1.5	0.7	1.1
	1.2	1.1	1.1	1.8	1.1	1.3	1.2	1.6	1.9	0.1	1.4

TABLE A19 (Cont'd)

Canadian List Number and Diagnosis	Prince Edward Island	Nova Scotia	Quebec	Ontario	Manitoba	Saskat- chewan	Alberta	British Columbia	Yukon	Northwest Terri- tories	Total
XI DELIVERIES AND COMPLICATIONS OF PREGNANCY, CHILDBIRTH AND THE PUERPERIUM											
73. Complications of pregnancy	20.6	23.2	22.7	21.6	18.5	16.8	19.3	18.3	20.5	17.5	20.9
74. Abortion	2.9	3.0	2.5	2.8	2.7	2.9	2.6	2.9	3.4	3.0	2.7
75. Delivery without mention of complications	1.9	1.7	2.2	2.1	1.7	1.4	1.9	1.8	2.1	1.8	2.0
76. Delivery with specified complications	15.5	17.1	17.0	14.8	12.7	11.2	14.0	12.1	14.3	11.5	14.8
77. Complications of the puerperium	0.2	1.3	0.8	1.8	1.3	1.0	0.7	1.4	0.4	1.0	1.2
	0.03	0.1	0.3	0.04	0.1	0.2	0.2	0.2	0.3	0.3	0.2
XII DISEASES OF THE SKIN AND CELLULAR TISSUE											
78. Infection of skin and subcutaneous tissue	2.1	2.1	2.7	2.0	2.2	2.0	2.3	1.9	3.4	3.9	2.2
79. Other diseases of skin and subcutaneous tissue	1.1	1.0	1.2	1.0	1.2	1.0	1.3	1.0	2.3	3.0	1.1
	1.0	1.1	1.5	1.0	1.0	1.0	1.0	0.8	1.1	0.9	1.1
XIII DISEASES OF BONES AND ORGANS OF MOVEMENT											
80. Arthritis and rheumatism, except rheumatic fever	3.3	2.8	3.3	3.2	3.3	3.5	3.9	3.2	2.2	1.7	3.3
81. Displacement of intervertebral disc	1.0	1.1	1.3	1.2	1.3	1.7	1.7	1.0	0.8	0.7	1.3
82. Other diseases of bones and organs of movement	1.3	0.6	0.6	0.6	0.7	0.6	0.7	0.8	0.7	0.2	0.7
	1.0	1.1	1.4	1.4	1.3	1.2	1.5	1.4	0.7	0.7	1.4
XIV CONGENITAL MALFORMATIONS											
83. Congenital malformations	0.8	1.1	0.9	0.9	0.8	0.6	0.9	1.0	0.3	0.9	0.9
	0.8	1.1	0.9	0.9	0.8	0.6	0.9	1.0	0.3	0.9	0.9
XV CERTAIN DISEASES OF EARLY INFANCY											
84. Certain diseases of early infancy	0.4	0.9	0.6	0.3	0.3	0.6	0.3	0.2	0.5	1.5	0.4
	0.4	0.9	0.6	0.3	0.3	0.6	0.3	0.2	0.5	1.5	0.4

TABLE A19 (Cont'd)

Canadian List Number and Diagnosis	Prince Edward Island	Nova Scotia	Quebec	Ontario	Manitoba	Saskat- chewan	Alberta	British Columbia	Yukon	Northwest Terri- tories	Total
XVI SYMPTOMS, SENILITY AND ILL-DEFINED CONDITIONS											
85. Symptoms, senility and ill-defined conditions	2.1	2.7	2.3	2.1	3.4	2.6	2.1	1.3	2.9	3.7	2.2
	2.1	2.7	2.3	2.1	3.4	2.6	2.1	1.3	2.9	3.7	2.2
XVII ACCIDENTS, POISONINGS, AND VIOLENCE (NATURE OF INJURY)											
86. Fracture of or involving skull or face bones, and head injury, except open wounds, contusion and haematoma of scalp	7.5	7.7	7.8	8.9	9.1	8.6	9.8	8.8	12.6	6.1	8.6
87. Fracture of spine and trunk	1.0	1.1	1.2	1.4	1.1	1.0	1.0	1.3	1.0	0.7	1.2
88. Fracture of upper limb	0.6	0.4	0.4	0.5	0.4	0.4	0.5	0.5	0.5	0.2	0.5
89. Fracture of femur	1.2	1.0	1.0	1.2	1.3	1.3	1.4	1.2	1.1	0.5	1.2
90. Other fractures of lower limb (excluding femur)	0.5	0.5	0.4	0.6	0.6	0.4	0.4	0.6	0.3	0.2	0.5
91. Dislocation without fracture, and sprains and strains of joints and adjacent muscles	0.9	0.7	0.8	0.9	0.8	0.7	0.9	0.7	1.3	0.5	0.8
92. Internal injury of chest, abdomen and pelvis	0.4	0.4	0.6	0.8	0.8	0.7	1.6	0.7	2.3	0.6	0.8
93. Burns	0.1	0.1	0.1	0.1	0.1	0.1	0.1	0.1	0.2	0.1	0.1
94. Other and unspecified effects of accidents, poisonings and violence	0.4	0.4	0.3	0.4	0.5	0.4	0.4	0.4	0.8	0.6	0.4
	2.5	2.9	3.1	3.1	3.6	3.6	3.4	3.2	5.0	2.6	3.2

(1) The data relate mainly to provincial hospital insurance plan in-patients hospitalized within or outside the respective provinces. For information on variations and exceptions in particular provinces, see footnotes to Table A15.

(2) Excludes Newfoundland and New Brunswick.

(3) Excludes X SUPPLEMENTARY CLASSIFICATIONS FOR SPECIAL ADMISSIONS, LIVEBIRTHS AND STILLBIRTHS (95-98).

Source: Data supplied to Department of National Health and Welfare by Provincial Plans.

TABLE A20

DAYS OF CARE OF SEPARATIONS PER THOUSAND POPULATION BY PRIMARY DIAGNOSIS ACCORDING TO THE CANADIAN LIST OF 98 DIAGNOSES, ADULT AND CHILD INPATIENTS INSURED BY PROVINCIAL PLANS⁽¹⁾, BY PROVINCE, 1962

Canadian List Number and Diagnosis	Prince Edward Island	Nova Scotia	Quebec	Ontario	Manitoba	Saskat- chewan	Alberta	British Columbia	Yukon	Northwest Terri- tories	Total ⁽²⁾
ALL CAUSES (1-94) ⁽³⁾	1,780.4	1,449.6	1,617.3	1,947.9	1,816.3	1,977.1	2,247.4	1,652.0	1,988.1	2,615.2	1,815.1
I INFECTIVE AND PARASITIC DISEASES											
1. Tuberculosis, all forms	44.6	18.3	54.8	21.9	48.0	29.1	55.9	30.5	103.2	281.2	37.7
2. Poliomyelitis and encephalitis	13.9	3.2	11.2	1.8	4.9	1.6	3.2	2.7	8.2	39.5	5.2
3. Infectious hepatitis	11.8	1.6	4.1	3.4	13.7	3.9	23.8	6.5	3.7	3.0	6.1
4. Other diseases attributable to viruses	2.7	2.3	10.1	4.0	4.4	3.6	7.1	6.5	53.8	46.5	6.4
5. Other infective, bacterial, spirochaetal rickettisial or parasitic diseases	7.1	3.6	10.7	4.8	11.9	8.3	7.7	5.9	24.8	73.5	7.6
	9.1	7.6	18.7	7.9	13.2	11.7	14.2	9.0	12.7	118.7	12.5
II NEOPLASMS											
6. Malignant neoplasm of buccal cavity and pharynx	164.2	148.0	133.8	164.5	169.7	181.2	155.5	160.4	49.6	72.9	154.2
7. Malignant neoplasm of stomach	2.5	4.6	2.7	2.9	2.4	3.2	4.5	2.5	0.9	6.3	3.0
8. Malignant neoplasm of large intestine, except rectum	8.5	8.0	5.1	6.9	10.2	9.7	9.0	8.5	1.7	6.3	7.1
9. Malignant neoplasm of rectum	10.7	13.3	8.1	14.1	14.0	12.7	10.2	10.8	13.1	-	11.5
10. Malignant neoplasm of bronchus, trachea & lung, primary & unspecified as to whether primary or secondary	6.8	6.3	4.8	8.5	9.3	9.5	5.6	9.3	1.2	6.0	7.2
11. Malignant neoplasm of breast	4.3	8.7	6.6	10.2	11.2	9.8	8.6	12.5	1.3	2.9	9.1
12. Malignant neoplasm of cervix uteri	14.2	14.1	12.5	16.2	15.4	15.5	12.5	15.0	1.9	2.7	14.5
13. Malignant neoplasm of uterus other than of cervix uteri	20.1	8.3	6.1	6.0	5.4	3.8	5.3	6.6	1.6	1.9	6.1
14. Malignant neoplasm of ovary, Fallopian tube and broad ligament	2.6	2.3	1.8	3.6	3.3	3.7	1.5	2.8	-	0.3	2.7
15. Malignant neoplasm of prostate	3.7	2.7	1.8	2.6	4.3	3.3	2.4	3.6	0.7	-	2.6
16. Malignant neoplasm of kidney, bladder and other urinary organs	17.1	7.6	4.5	9.5	14.0	19.0	13.6	12.0	-	1.5	9.2
17. Leukaemia and aleukaemia	13.4	7.8	4.4	9.4	9.7	11.6	8.6	9.4	0.6	6.1	7.9
	2.0	2.8	3.2	3.9	4.9	5.7	4.3	4.3	2.6	1.4	3.9

TABLE A2C (Cont'd)

Canadian List Number and Diagnosis	Prince Edward Island	Nova Scotia	Quebec	Ontario	Manitoba	Saskat- chewan	Alberta	British Columbia	Yukon	Northwest Terri- tories	Total(2)
II NEOPLASMS (Cont'd)											
18. Other malignant neoplasms and neoplasms of lymphatic and haematopoietic tissue	36.1	30.9	26.3	35.8	37.6	33.0	35.4	28.9	3.6	8.2	31.9
19. Benign neoplasm of uterus	7.3	9.9	13.4	13.5	8.6	18.9	12.7	14.1	5.9	5.5	13.3
20. Benign neoplasm of ovary	3.0	4.4	6.3	5.3	3.2	5.3	4.5	3.8	3.3	4.5	5.2
21. Benign neoplasms (excluding uterus and ovary and neoplasm of unspecified nature)	11.9	16.4	26.0	15.8	15.3	16.5	16.9	16.2	11.1	19.0	19.1
III ALLERGIC, ENDOCRINE SYSTEM, METABOLIC AND NUTRITIONAL DISEASES											
22. Asthma	74.4	63.6	61.0	63.3	56.9	74.7	90.7	56.2	39.3	58.3	64.4
23. Other allergic disorders (excluding asthma)	12.6	9.7	7.0	10.4	10.1	15.7	14.3	16.0	2.4	14.3	10.5
24. Diseases of thyroid gland	2.3	2.4	4.3	2.0	2.1	3.5	3.0	2.3	5.1	6.0	2.9
25. Diabetes mellitus	4.0	9.0	9.3	6.5	6.1	9.5	7.4	5.7	9.6	5.2	7.6
26. Diseases of other endocrine glands	43.2	34.2	29.9	37.4	33.1	39.0	58.0	26.1	19.8	6.5	35.3
27. Avitaminoses and other metabolic diseases	3.6	2.5	3.1	2.2	1.7	1.8	1.7	1.6	-	5.0	2.3
	8.7	5.8	7.3	4.8	3.8	5.2	6.2	4.5	2.3	21.4	5.7
IV DISEASES OF THE BLOOD AND BLOOD-FORMING ORGANS											
28. Diseases of the blood and blood- forming organs	10.2	11.0	12.1	15.6	13.0	13.0	17.9	10.6	5.4	10.4	13.7
	10.2	11.0	12.1	15.6	13.0	13.0	17.9	10.6	5.4	10.4	13.7
V MENTAL, PSYCHONEUROTIC, AND PERSONALITY DISORDERS											
29. Psychoses	24.2	32.8	83.7	68.4	60.4	53.9	69.5	37.9	55.2	40.7	67.3
30. Psychoneurotic disorders	4.9	13.5	18.8	26.1	31.0	24.5	37.2	15.5	20.2	19.9	23.2
31. Disorders of character, behaviour and intelligence	8.2	14.2	54.4	33.3	19.1	23.9	24.1	17.5	23.1	18.2	35.3
	11.0	5.1	10.5	9.0	10.4	5.5	8.2	5.0	11.9	2.7	8.7

TABLE A20 (Cont'd)

Canadian List Number and Diagnosis	Prince Edward Island	Nova Scotia	Quebec	Ontario	Manitoba	Saskat- chewan	Alberta	British Columbia	Yukon	Northwest Terri- tories	Total(2)
VI DISEASES OF THE NERVOUS SYSTEM AND SENSE ORGANS											
32. Vascular lesions affecting central nervous system	103.4	82.8	118.2	263.5	191.1	131.7	297.3	113.1	82.4	180.2	187.5
33. Inflammatory and other diseases of central nervous system	45.3	39.4	34.3	142.6	96.7	57.6	119.7	50.4	12.8	10.7	86.6
34. Diseases of nerves and peripheral ganglia	27.4	18.7	39.1	85.5	59.3	27.1	123.9	18.0	15.1	60.8	60.1
35. Diseases and conditions of the eye	9.4	4.3	7.7	6.4	5.7	8.0	7.7	6.0	2.9	3.2	6.8
36. Diseases of ear and mastoid process	9.8	13.8	19.3	18.7	18.1	19.4	25.3	20.4	17.9	66.7	19.4
	11.6	6.6	17.8	10.3	11.3	19.6	20.8	18.3	33.7	38.7	14.6
VII DISEASES OF THE CIRCULATORY SYSTEM											
37. Rheumatic fever and chronic rheumatic heart disease	276.1	170.6	204.9	312.7	223.1	271.3	319.9	219.4	127.7	205.0	257.8
38. Arteriosclerotic and degenerative heart disease	12.3	9.0	12.8	12.4	11.7	15.9	18.5	12.9	22.4	103.3	13.2
39. Other diseases of the heart	127.0	82.0	96.4	163.9	103.8	113.7	146.1	112.6	52.5	22.8	127.0
40. Hypertensive heart diseases and other hypertensive disease	25.7	18.5	15.3	21.5	31.2	52.4	41.5	16.8	13.9	36.5	22.8
41. Diseases of arteries	43.3	17.0	24.5	26.8	17.2	28.7	34.8	16.7	7.1	7.4	25.0
42. Varicose veins of lower extremities	14.0	14.7	24.9	50.5	27.9	19.5	43.0	19.1	1.6	5.5	34.4
43. Haemorrhoids	17.3	12.9	8.9	14.9	10.8	15.1	13.3	18.9	10.9	4.6	13.0
44. Phlebitis and thrombophlebitis	20.9	6.1	10.0	9.5	8.6	10.5	9.2	9.6	10.5	4.9	9.5
45. Other diseases of the circulatory system	6.5	3.9	3.5	5.9	6.0	8.0	6.7	5.9	4.8	8.3	5.3
	9.0	6.6	8.6	7.2	6.0	7.5	6.8	6.8	4.0	11.7	7.5
VIII DISEASES OF THE RESPIRATORY SYSTEM											
46. Acute upper respiratory infections	274.0	149.0	139.1	138.0	194.0	255.3	230.5	184.1	392.9	692.0	161.4
47. Influenza	17.9	9.0	10.0	14.0	16.5	27.7	31.6	19.3	61.3	24.9	15.4
48. Pneumonia	13.7	7.5	4.5	4.4	10.9	20.7	16.6	8.2	10.9	18.1	7.2
49. Bronchitis	158.8	74.5	44.2	51.6	80.0	101.5	81.9	75.7	214.1	384.3	60.5
50. Hypertrophy of tonsils and adenoids	42.6	24.2	26.9	23.3	38.7	55.2	44.2	31.6	66.3	87.6	29.6
51. Other diseases of respiratory system	25.1	18.9	21.5	22.2	17.1	24.0	26.9	26.6	23.6	19.7	22.5
	15.9	14.8	32.0	22.1	30.9	26.0	29.3	22.7	16.7	157.5	26.3

TABLE A20 (Cont'd)

Canadian List Number and Diagnosis	Prince Edward Island	Nova Scotia	Quebec	Ontario	Manitoba	Saskat- chewan	Alberta	British Columbia	Yukon	Northwest Terri- tories	Total ⁽²⁾
IX DISEASES OF THE DIGESTIVE SYSTEM											
52. Diseases of teeth and supporting structure	184.5	194.2	224.0	205.9	210.7	258.3	219.1	205.0	192.9	212.2	214.8
53. Ulcer of stomach, duodenum and jejunum	2.4	0.8	3.3	2.5	5.4	6.3	6.2	4.9	4.5	2.2	3.5
54. Gastritis, duodenitis and other disorders and diseases of the stomach and duodenum	37.8	37.8	34.8	35.6	33.9	41.4	31.3	42.0	21.2	17.4	35.9
55. Appendicitis	7.3	7.0	16.7	7.8	6.6	13.0	9.5	7.0	13.1	5.7	10.8
56. Hernia of abdominal cavity	23.4	29.3	23.6	24.4	21.6	31.5	26.0	17.7	24.1	18.9	24.1
57. Intestinal obstruction without mention of hernia	18.7	25.7	29.6	32.8	31.8	33.3	31.8	31.1	34.5	12.7	31.2
58. Gastro-enteritis and colitis, except ulcerative, age 4 weeks and over	8.1	6.6	4.6	7.1	6.9	7.5	9.7	8.2	7.8	1.5	6.6
59. Chronic enteritis and ulcerative colitis	19.3	15.2	21.4	15.0	25.6	35.3	25.6	16.7	33.3	87.4	19.8
60. Cirrhosis and other diseases of liver	10.4	11.0	7.5	12.0	9.5	10.7	7.9	12.4	1.2	12.2	10.1
61. Diseases of gallbladder and pancreas	5.2	5.2	9.5	7.8	7.0	4.5	6.7	6.0	7.3	2.2	7.7
62. Other diseases of digestive system	39.8	37.7	53.7	42.0	46.1	57.0	45.9	39.4	28.0	28.0	46.5
	12.1	17.9	19.3	18.6	16.1	17.9	18.3	19.5	17.9	24.2	18.6
X DISEASES OF THE GENITO-URINARY SYSTEM											
63. Nephritis and nephrosis	116.2	113.6	110.3	121.1	103.0	153.8	116.8	134.2	126.5	148.5	119.2
64. Infections of kidney	12.1	5.9	8.3	7.0	5.7	10.5	9.0	6.9	8.3	45.3	7.7
65. Calculi of kidney, ureter and other parts of urinary system	14.9	10.4	9.3	11.5	11.6	15.9	13.9	15.6	11.8	21.2	11.6
66. Other diseases of urinary system	10.5	9.1	7.6	8.9	7.2	11.3	7.4	9.6	4.6	6.3	8.5
67. Hyperplasia of prostate	17.4	17.8	16.4	17.5	16.3	22.8	17.9	22.9	13.6	10.7	17.9
68. Redundant prepuce of phimosis	20.4	21.2	12.7	18.6	23.2	37.1	21.2	30.6	12.3	7.1	19.5
69. Diseases of ovary, Fallopian tube and parametrium, and infective diseases of uterus, vagina and vulva	1.2	2.2	2.8	1.5	0.9	1.9	1.6	1.3	1.9	2.4	1.9
70. Uterovaginal prolapse	10.6	12.6	16.7	15.8	7.6	10.5	9.9	9.7	26.8	12.3	14.1
71. Disorders of menstruation	12.6	11.2	12.7	15.9	11.6	16.7	12.0	15.2	9.0	12.0	14.1
72. Other diseases of genital organs	4.3	11.0	9.4	8.2	7.9	9.4	9.6	7.1	11.7	9.7	8.7
	12.2	12.1	14.3	16.3	10.9	17.7	14.2	15.3	26.4	21.4	15.0

TABLE A20 (Cont'd)

Canadian List Number and Diagnosis	Prince Edward Island	Nova Scotia	Quebec	Ontario	Manitoba	Saskat- chewan	Alberta	British Columbia	Yukon	Northwest Terri- tories	Total(2)
XI DELIVERIES AND COMPLICATIONS OF PREGNANCY, CHILDBIRTH AND THE PUERPERIUM											
73. Complications of pregnancy	192.7	175.5	176.6	191.7	179.8	202.9	222.0	185.6	300.6	262.0	188.3
74. Abortion	16.3	15.4	15.4	20.4	16.4	24.9	20.0	22.2	36.6	33.2	18.9
75. Delivery without mention of complications	12.1	9.6	13.9	12.3	11.9	11.8	13.1	12.0	19.5	19.2	12.7
76. Delivery with specified complications	162.3	131.7	132.6	134.7	131.5	144.9	174.5	126.9	228.5	176.7	137.0
77. Complications of the puerperium	1.9	17.8	10.3	23.1	18.3	18.7	12.0	23.0	12.1	24.1	17.4
	0.2	0.9	4.5	0.9	1.7	2.6	2.3	1.6	3.8	8.8	2.3
XII DISEASES OF THE SKIN AND CELLULAR TISSUE											
78. Infection of skin and subcutaneous tissue	32.0	32.2	39.9	27.5	33.0	38.6	33.8	30.7	72.9	107.8	33.4
79. Other diseases of skin and subcutaneous tissue	15.2	12.4	16.1	10.3	14.5	13.7	15.6	15.1	41.9	60.5	13.6
	16.8	19.8	23.8	17.2	18.5	24.9	18.2	15.6	31.0	47.3	19.8
XIII DISEASES OF BONES AND ORGANS OF MOVEMENT											
80. Arthritis and rheumatism, except rheumatic fever	103.2	59.8	77.7	122.2	92.6	89.1	144.5	81.1	71.4	58.9	100.2
81. Displacement of intervertebral disc	37.3	27.6	33.2	68.6	46.0	44.3	77.9	29.1	24.6	29.5	50.2
82. Other diseases of bones and organs of movement	29.4	12.4	13.7	19.7	18.1	17.7	22.0	21.1	25.2	9.2	17.7
	36.5	19.8	30.8	33.7	28.5	27.2	44.6	30.9	21.6	20.2	32.2
XIV CONGENITAL MALFORMATIONS											
83. Congenital malformations	25.3	22.2	21.0	21.7	21.4	19.3	24.0	24.3	4.1	34.5	21.8
	25.3	22.2	21.0	21.7	21.4	19.3	24.0	24.3	4.1	34.5	21.8
XV CERTAIN DISEASES OF EARLY INFANCY											
84. Certain diseases of early infancy	7.1	16.6	13.6	5.8	6.4	13.9	7.1	4.9	15.7	51.8	9.2
	7.1	16.6	13.6	5.8	6.4	13.9	7.1	4.9	15.7	51.8	9.2

TABLE A20 (Cont'd)

Canadian List Number and Diagnosis	Prince Edward Island	Nova Scotia	Quebec	Ontario	Manitoba	Saskat- chewan	Alberta	British Columbia	Yukon	Northwest Terri- tories	Total(2)
XVI SYMPTOMS, SENILITY AND ILL-DEFINED CONDITIONS											
85. Symptoms, senility and ill-defined conditions	23.2	30.0	35.9	28.2	41.9	32.9	51.1	12.0	43.9	48.3	31.9
	23.2	30.0	35.9	28.2	41.9	32.9	51.1	12.0	43.9	48.3	31.9
XVII ACCIDENTS, POISONINGS, AND VIOLENCE (NATURE OF INJURY)											
86. Fracture of or involving skull or face bones and head injury, except open wounds, contusion and haematoma of scalp	10.6	11.0	14.4	15.4	10.8	11.6	13.1	13.7	15.5	9.0	14.1
87. Fracture of spine and trunk	13.9	13.6	11.0	16.9	16.7	15.1	24.8	19.4	30.9	4.5	15.7
88. Fracture of upper limb	9.0	9.2	8.0	11.3	11.4	14.3	13.8	10.4	16.3	11.5	10.5
89. Fracture of femur	25.7	33.0	18.2	57.0	50.5	30.7	42.3	44.4	21.1	30.7	39.8
90. Other fractures of lower limb (excluding femur)	28.6	15.7	13.7	22.7	21.7	19.8	24.8	19.8	40.4	13.2	19.4
91. Dislocation without fracture, and sprains and strains of joints and adjacent muscles	3.2	5.3	7.2	11.5	9.4	8.4	21.2	9.5	46.9	11.9	10.2
92. Internal injury of chest, abdomen and pelvis	0.7	2.7	1.9	2.0	2.4	2.2	3.4	3.1	2.8	4.7	2.3
93. Burns	10.6	10.9	7.2	9.3	11.1	11.0	11.3	10.6	48.4	18.4	9.3
94. Other and unspecified effects of accidents, poisonings and violence	22.7	28.0	28.9	29.3	36.9	44.7	37.1	31.0	82.1	46.4	31.2

(1) The data relate mainly, to provincial hospital insurance plan in-patients hospitalized within or outside the respective provinces. For information on variations and exceptions in particular provinces, see footnotes to Table A15.

(2) Excludes Newfoundland and New Brunswick.

(3) Excludes X SUPPLEMENTARY CLASSIFICATIONS FOR SPECIAL ADMISSIONS, LIVEBIRTHS AND STILLBIRTHS (95-98).

Source: Data supplied to Department of National Health and Welfare by Provincial Plans.

TABLE A21

PERCENTAGE DISTRIBUTION OF DAYS OF SEPARATIONS, BY PRIMARY DIAGNOSIS ACCORDING TO THE CANADIAN LIST OF 98 DIAGNOSES, ADULT AND CHILD INPATIENTS INSURED BY PROVINCIAL PLANS,⁽¹⁾ BY PROVINCE, 1962

Canadian List Number and Diagnosis	Prince Edward Island	Nova Scotia	Quebec	Ontario	Manitoba	Saskat- chewan	Alberta	British Columbia	Yukon	Northwest Terri- tories	Total ⁽²⁾
ALL CAUSES (1-94) ⁽³⁾	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0
I INFECTIVE AND PARASITIC DISEASES											
1. Tuberculosis, all forms	2.5	1.3	3.4	1.1	2.6	1.5	2.5	1.8	5.2	10.8	2.1
2. Poliomyelitis and encephalitis	0.8	0.2	0.7	0.1	0.3	0.1	0.1	0.2	0.4	1.5	0.3
3. Infectious hepatitis	0.7	0.1	0.3	0.2	0.8	0.2	1.1	0.4	0.2	0.1	0.3
4. Other diseases attributable to viruses	0.2	0.2	0.6	0.2	0.2	0.2	0.3	0.4	2.7	1.8	0.4
5. Other infective, bacterial, spirochaetal rickettsial or parasitic diseases	0.4	0.2	0.7	0.2	0.7	0.4	0.3	0.4	1.2	2.8	0.4
	0.5	0.5	1.2	0.4	0.7	0.6	0.6	0.5	0.6	4.5	0.7
II NEOPLASMA											
6. Malignant neoplasm of buccal cavity and pharynx	9.2	10.2	8.3	8.4	9.3	9.2	6.9	9.7	2.5	2.8	8.5
7. Malignant neoplasm of stomach	0.1	0.3	0.2	0.2	0.1	0.2	0.2	0.2	0.1	0.2	0.2
8. Malignant neoplasm of large intestine, except rectum	0.5	0.6	0.3	0.4	0.6	0.5	0.4	0.5	0.1	0.2	0.4
9. Malignant neoplasm of rectum	0.6	0.9	0.5	0.7	0.8	0.6	0.5	0.7	0.7	-	0.6
10. Malignant neoplasm of bronchus, trachea & lung, primary & unspecified as to whether primary or secondary	0.4	0.4	0.3	0.4	0.5	0.5	0.2	0.6	0.1	0.2	0.4
11. Malignant neoplasm of breast	0.2	0.6	0.4	0.5	0.6	0.5	0.4	0.8	0.1	0.1	0.5
12. Malignant neoplasm of cervix uteri	0.8	1.0	0.8	0.8	0.8	0.8	0.6	0.9	0.1	0.1	0.8
13. Malignant neoplasm of uterus other than of cervix uteri	1.1	0.6	0.4	0.3	0.4	0.2	0.2	0.4	0.1	0.1	0.3
14. Malignant neoplasm of ovary, Fallopian tube and broad ligament	0.1	0.2	0.1	0.2	0.2	0.2	0.1	0.2	-	0.01	0.2
15. Malignant neoplasm of prostate	0.2	0.2	0.1	0.1	0.2	0.2	0.1	0.2	0.04	-	0.1
16. Malignant neoplasm of kidney, bladder and other urinary organs	1.0	0.5	0.3	0.5	0.8	1.0	0.6	0.7	-	0.1	0.5
17. Leukaemia and aleukaemia	0.8	0.5	0.3	0.5	0.5	0.6	0.4	0.6	0.03	0.2	0.4
	0.1	0.2	0.2	0.2	0.3	0.3	0.2	0.3	0.1	0.1	0.2

TABLE A21 (Cont'd.)

Canadian List Number and Diagnosis	Prince Edward Island	Nova Scotia	Quebec	Ontario	Manitoba	Saskat- chewan	Alberta	British Columbia	Yukon	Northwest Terri- tories	Total(2)
II NEOPLASMS (Cont'd.)											
18. Other malignant neoplasms and neoplasms of lymphatic and haematopoietic tissue	2.0	2.1	1.6	1.8	2.1	1.7	1.6	1.7	0.2	0.3	1.8
19. Benign neoplasm of uterus	0.4	0.7	0.8	0.7	0.5	1.0	0.6	0.9	0.3	0.2	0.7
20. Benign neoplasm of ovary	0.2	0.3	0.4	0.3	0.2	0.3	0.2	0.2	0.2	0.2	0.3
21. Benign neoplasms (excluding uterus and ovary and neoplasm of unspecified nature)	0.7	1.1	1.6	0.8	0.8	0.8	0.8	1.0	0.6	0.7	1.1
III ALLERGIC, ENDOCRINE SYSTEM, METABOLIC AND NUTRITIONAL DISEASES											
22. Asthma	4.2	4.4	3.8	3.3	3.1	3.8	4.0	3.4	2.0	2.2	3.5
23. Other allergic disorders (excluding asthma)	0.7	0.7	0.4	0.5	0.6	0.8	0.6	1.0	0.1	0.5	0.6
24. Diseases of thyroid gland	0.1	0.2	0.3	0.1	0.1	0.2	0.1	0.1	0.3	0.2	0.2
25. Diabetes mellitus	0.2	0.6	0.6	0.3	0.3	0.5	0.3	0.3	0.5	0.2	0.4
26. Diseases of other endocrine glands	2.4	2.4	1.8	1.9	1.8	2.0	2.6	1.6	1.0	0.2	1.9
27. Avitaminoses and other metabolic diseases	0.2	0.2	0.2	0.1	0.1	0.1	0.1	0.1	-	0.2	0.1
	0.5	0.4	0.5	0.2	0.2	0.3	0.3	0.3	0.1	0.8	0.3
IV DISEASES OF THE BLOOD AND BLOOD-FORMING ORGANS											
28. Diseases of the blood and blood-forming organs	0.6	0.8	0.7	0.8	0.7	0.7	0.8	0.6	0.3	0.4	0.8
	0.6	0.8	0.7	0.8	0.7	0.7	0.8	0.6	0.3	0.4	0.8
V MENTAL, PSYCHONEUROTIC, AND PERSONALITY DISORDERS											
29. Psychoses	1.4	2.3	5.2	3.5	3.3	2.7	3.1	2.3	2.8	1.6	3.7
30. Psychoneurotic disorders	0.3	0.9	1.2	1.3	1.7	1.2	1.7	0.9	1.0	0.8	1.3
31. Disorders of character, behaviour and intelligence	0.5	1.0	3.4	1.7	1.0	1.2	1.1	1.1	1.2	0.7	1.9
	0.6	0.4	0.7	0.5	0.6	0.3	0.4	0.3	0.6	0.1	0.5

TABLE A21 (Cont'd.)

Canadian List Number and Diagnosis	Prince Edward Island	Nova Scotia	Quebec	Ontario	Manitoba	Saskat- chewan	Alberta	British Columbia	Yukon	Northwest Terri- tories	Total(2)
VI DISEASES OF THE NERVOUS SYSTEM AND SENSE ORGANS											
32. Vascular lesions affecting central nervous system	5.8	5.7	7.3	13.5	10.5	6.7	13.2	6.8	4.1	6.9	10.3
33. Inflammatory and other diseases of central nervous system	2.5	2.7	2.1	7.3	5.3	2.9	5.3	3.1	0.6	0.4	4.8
34. Diseases of nerves and peripheral ganglia	1.5	1.3	2.4	4.4	3.3	1.4	5.5	1.1	0.8	2.3	3.3
35. Diseases and conditions of the eye	0.5	0.3	0.5	0.3	0.3	0.4	0.3	0.4	0.1	0.1	0.4
36. Diseases of ear and mastoid process	0.5	1.0	1.2	1.0	1.0	1.0	1.1	1.2	0.9	2.6	1.1
	0.7	0.5	1.1	0.5	0.6	1.0	0.9	1.1	1.7	1.5	0.8
VII DISEASES OF THE CIRCULATORY SYSTEM											
37. Rheumatic fever and chronic rheumatic heart disease	15.5	11.8	12.7	16.1	12.3	13.7	14.2	13.3	6.4	7.8	14.2
38. Arteriosclerotic and degenerative heart disease	0.7	0.6	0.8	0.6	0.6	0.8	0.8	0.8	1.1	3.9	0.7
39. Other diseases of the heart	7.1	5.7	6.0	8.4	5.7	5.7	6.5	6.8	2.6	0.9	7.0
40. Hypertensive heart diseases and other hypertensive disease	1.4	1.3	0.9	1.1	1.7	2.6	1.8	1.0	0.7	1.4	1.3
41. Diseases of arteries	2.4	1.2	1.5	1.4	0.9	1.5	1.5	1.0	0.4	0.3	1.4
42. Varicose veins of lower extremities	0.8	1.0	1.5	2.6	1.5	1.0	1.9	1.2	0.1	0.2	1.9
43. Haemorrhoids	1.0	0.9	0.6	0.8	0.6	0.8	0.6	1.1	0.5	0.2	0.7
44. Phlebitis and thrombophlebitis	1.2	0.4	0.6	0.5	0.5	0.5	0.4	0.6	0.5	0.2	0.5
45. Other diseases of the circulatory system	0.4	0.3	0.2	0.3	0.3	0.4	0.3	0.4	0.2	0.3	0.3
	0.5	0.5	0.5	0.4	0.3	0.4	0.3	0.4	0.2	0.4	0.4
VIII DISEASES OF THE RESPIRATORY SYSTEM											
46. Acute upper respiratory infections	15.4	10.3	8.6	7.1	10.7	12.9	10.3	11.1	19.8	26.5	8.9
47. Influenza	1.0	0.6	0.6	0.7	0.9	1.4	1.4	1.2	3.1	1.0	0.8
48. Pneumonia	0.8	0.5	0.3	0.2	0.6	1.0	0.7	0.5	0.5	0.7	0.4
49. Bronchitis	8.9	5.1	2.7	2.7	4.4	5.1	3.6	4.6	10.8	14.7	3.3
50. Hypertrophy of tonsils and adenoids	2.4	1.7	1.7	1.2	2.1	2.8	2.0	1.9	3.3	3.3	1.6
51. Other diseases of respiratory system	1.4	1.3	1.3	1.1	0.9	1.2	1.2	1.6	1.2	0.8	1.2
	0.9	1.0	2.0	1.1	1.7	1.3	1.3	1.4	0.8	6.0	1.4

TABLE A21 (Cont'd.)

Canadian List Number and Diagnosis	Prince Edward Island	Nova Scotia	Quebec	Ontario	Manitoba	Saskat- chewan	Alberta	British Columbia	Yukon	Northwest Terra- tories	Total ⁽²⁾
IX DISEASES OF THE DIGESTIVE SYSTEM											
52. Diseases of teeth and supporting structure	10.4	13.4	13.8	10.6	11.6	13.1	9.7	12.4	9.7	8.1	11.8
53. Ulcer of stomach, duodenum and jejunum	0.1	0.1	0.2	0.1	0.3	0.3	0.3	0.3	0.2	0.1	0.2
54. Gastritis, duodenitis and other disorders and diseases of the stomach and duodenum	2.1	2.6	2.2	1.8	1.9	2.1	1.4	2.5	1.1	0.7	2.0
55. Appendicitis	0.4	0.5	1.0	0.4	0.4	0.7	0.4	0.4	0.7	0.2	0.6
56. Hernia of abdominal cavity	1.3	2.0	1.5	1.3	1.2	1.6	1.2	1.1	1.2	0.7	1.3
57. Intestinal obstruction without mention of hernia	1.1	1.8	1.8	1.7	1.8	1.7	1.4	1.9	1.7	0.5	1.7
58. Gastro-enteritis and colitis, except ulcerative, age 4 weeks and over	0.5	0.5	0.3	0.4	0.4	0.4	0.4	0.5	0.4	0.1	0.4
59. Chronic enteritis and ulcerative colitis	1.1	1.1	1.3	0.8	1.4	1.8	1.1	1.0	1.7	3.3	1.1
60. Cirrhosis and other diseases of liver	0.6	0.8	0.5	0.6	0.5	0.5	0.4	0.7	0.1	0.5	0.6
61. Diseases of gallbladder and pancreas	0.3	0.4	0.6	0.4	0.4	0.2	0.3	0.4	0.4	0.1	0.4
62. Other diseases of digestive system	2.2	2.6	3.3	2.2	2.5	2.9	2.0	2.4	1.4	1.1	2.6
	0.7	1.2	1.2	1.0	0.9	0.9	0.8	1.2	0.9	0.9	1.0
X DISEASES OF THE GENITO-URINARY SYSTEM											
63. Nephritis and nephrosis	6.5	7.8	6.8	6.2	5.7	7.8	5.2	8.1	6.4	5.7	6.6
64. Infections of kidney	0.7	0.4	0.5	0.4	0.3	0.5	0.4	0.4	0.4	1.7	0.4
65. Calculi of kidney, ureter and other parts of urinary system	0.8	0.7	0.6	0.6	0.6	0.8	0.6	0.9	0.6	0.8	0.6
66. Other diseases of urinary system	0.6	0.6	0.5	0.5	0.4	0.6	0.3	0.6	0.2	0.2	0.5
67. Hyperplasia of prostate	1.0	1.2	1.0	0.9	0.9	1.2	0.8	1.4	0.7	0.4	1.0
68. Redundant prepuce of phimosis	1.1	1.5	0.8	1.0	1.3	1.9	0.9	1.9	0.6	0.3	1.1
69. Diseases of ovary, Fallopian tube and parametrium, and infective diseases of uterus, vagina and vulva	0.1	0.2	0.2	0.1	0.1	0.1	0.1	0.1	0.1	0.1	0.1
70. Uterovaginal prolapse	0.6	0.9	1.0	0.8	0.4	0.5	0.4	0.6	1.3	0.5	0.8
71. Disorders of menstruation	0.7	0.8	0.8	0.8	0.6	0.8	0.5	0.9	0.5	0.5	0.8
72. Other diseases of genital organs	0.2	0.8	0.6	0.4	0.4	0.5	0.4	0.4	0.6	0.4	0.5
	0.7	0.8	0.9	0.8	0.6	0.9	0.6	0.9	1.3	0.8	0.8

TABLE A21 (Cont'd.)

Canadian List Number and Diagnosis	Prince Edward Island	Nova Scotia	Quebec	Ontario	Manitoba	Saskat- chewan	Alberta	British Columbia	Yukon	Northwest Terri- tories	Total ⁽²⁾
XI DELIVERIES AND COMPLICATIONS OF PREGNANCY, CHILDBIRTH AND THE PUERPERIUM											
73. Complications of pregnancy	10.8	12.1	10.9	9.8	9.9	10.3	9.9	11.2	15.1	10.0	10.4
74. Abortion	0.9	1.1	1.0	1.1	0.9	1.3	0.9	1.3	1.8	1.3	1.0
75. Delivery without mention of complications	0.7	0.7	0.9	0.6	0.7	0.6	0.6	0.7	1.0	0.7	0.7
76. Delivery with specified complications	9.1	9.1	8.2	6.9	7.2	7.3	7.8	7.7	11.5	6.8	7.5
77. Complications of the puerperium	0.1	1.2	0.6	1.2	1.0	0.9	0.5	1.4	0.6	0.9	1.0
	0.01	0.1	0.3	0.1	0.1	0.1	0.1	0.1	0.2	0.3	0.1
XII DISEASES OF THE SKIN AND CELLULAR TISSUE											
78. Infection of skin and subcutaneous tissue	1.8	2.2	2.5	1.4	1.8	2.0	1.5	1.9	3.7	4.1	1.8
79. Other diseases of skin and subcutaneous tissue	0.9	0.9	1.0	0.5	0.8	0.7	0.7	0.9	2.1	2.3	0.7
	0.9	1.4	1.5	0.9	1.0	1.3	0.8	0.9	1.6	1.8	1.1
XIII DISEASES OF BONES AND ORGANS OF MOVEMENT											
80. Arthritis and rheumatism, except rheumatic fever	5.8	4.1	4.8	6.3	5.1	4.5	6.4	4.9	3.6	2.3	5.5
81. Displacement of intervertebral disc	2.1	1.9	2.1	3.5	2.5	2.2	3.5	1.8	1.2	1.1	2.8
82. Other diseases of bones and organs of movement	1.7	0.9	0.8	1.0	1.0	0.9	1.0	1.3	1.3	0.4	1.0
	2.1	1.4	1.9	1.7	1.6	1.4	2.0	1.9	1.1	0.8	1.8
XIV CONGENITAL MALFORMATIONS											
83. Congenital malformations	1.4	1.5	1.3	1.1	1.2	1.0	1.1	1.5	0.2	1.7	1.2
	1.4	1.5	1.3	1.1	1.2	1.0	1.1	1.5	0.2	1.7	1.2
XV CERTAIN DISEASES OF EARLY INFANCY											
84. Certain diseases of early infancy	0.4	1.1	0.8	0.3	0.4	0.7	0.3	0.3	0.8	2.0	0.5
	0.4	1.1	0.8	0.3	0.4	0.7	0.3	0.3	0.8	2.0	0.5

TABLE A21 (Cont'd.)

Canadian List Number and Diagnosis	Prince Edward Island	Nova Scotia	Quebec	Ontario	Manitoba	Saskat- chewan	Alberta	British Columbia	Yukon	Northwest Terri- tories	Total ⁽²⁾
XVI SYMPTOMS, SENILITY AND ILL-DEFINED CONDITIONS											
85. Symptoms, senility and ill-defined conditions	1.3	2.1	2.2	1.4	2.3	1.7	2.3	0.7	2.2	1.8	1.8
	1.3	2.1	2.2	1.4	2.3	1.7	2.3	0.7	2.2	1.8	1.8
XVII ACCIDENTS, POISONINGS, AND VIOLENCE (NATURE OF INJURY)											
86. Fracture of or involving skull or face bones and head injury, except open wounds, contusion and haematoma of scalp	7.0	8.9	6.8	9.0	9.4	8.0	8.5	9.8	15.3	5.8	8.4
87. Fracture of spine and trunk	0.6	0.8	0.9	0.8	0.6	0.6	0.6	0.8	0.8	0.3	0.8
88. Fracture of upper limb	0.8	0.9	0.7	0.9	0.9	0.8	1.1	1.2	1.6	0.2	0.9
89. Fracture of femur	0.5	0.6	0.5	0.6	0.6	0.7	0.6	0.6	0.8	0.4	0.6
90. Other fractures of lower limb (excluding femur)	1.4	2.3	1.1	2.9	2.8	1.6	1.9	2.7	1.1	1.2	2.2
91. Dislocation without fracture, and sprains and strains of joints and adjacent muscles	1.6	1.1	0.9	1.2	1.2	1.0	1.1	1.2	2.0	0.5	1.1
92. Internal injury of chest, abdomen and pelvis	0.2	0.4	0.4	0.6	0.5	0.4	0.9	0.6	2.4	0.5	0.6
93. Burns	0.04	0.2	0.1	0.1	0.1	0.1	0.2	0.2	0.1	0.2	0.1
94. Other and unspecified effects of accidents, poisonings and violence	0.6	0.7	0.4	0.5	0.6	0.6	0.5	0.6	2.4	0.7	0.5
	1.3	1.9	1.8	1.5	2.0	2.3	1.7	1.9	4.1	1.8	1.7

(1) The data relate mainly, to provincial hospital insurance plan in-patients hospitalized within or outside the respective provinces. For information on variations and exceptions in particular provinces, see footnotes to Table A15.

(2) Excludes Newfoundland and New Brunswick.

(3) Excludes X SUPPLEMENTARY CLASSIFICATIONS FOR SPECIAL ADMISSIONS, LIVEBIRTHS AND STILLBIRTHS (95-98).

Source: Data supplied to Department of National Health and Welfare by Provincial Plans.

TABLE A22

AVERAGE LENGTH OF STAY OF SEPARATIONS BY PRIMARY DIAGNOSIS ACCORDING TO THE CANADIAN LIST OF 98 DIAGNOSES, ADULT AND CHILD IN-PATIENTS INSURED BY PROVINCIAL PLANS⁽¹⁾, BY PROVINCE, 1962

Canadian List Number and Diagnosis	Prince Edward Island	Nova Scotia	Quebec	Ontario	Manitoba	Saskatchewan	Alberta	British Columbia	Yukon	Northwest Territories	Total ⁽²⁾
ALL CAUSES (1-94) ⁽³⁾	10.4	10.3	11.5	12.9	10.4	9.7	11.8	10.0	8.3	9.9	11.6
I. INFECTIVE AND PARASITIC DISEASES											
1. Tuberculosis, all forms	17.4	11.9	17.8	13.2	13.3	9.6	17.0	12.9	11.6	11.0	15.1
2. Poliomyelitis and encephalitis	43.3	14.0	36.8	16.4	16.6	12.2	18.1	15.8	11.2	12.8	25.8
3. Infectious hepatitis	59.6	15.7	31.1	25.2	61.2	27.2	110.5	39.2	55.0	36.5	41.2
4. Other diseases attributable to viruses	19.1	13.9	14.4	14.5	11.0	11.2	11.8	14.0	13.2	8.8	13.7
5. Other infective, bacterial, spirochaetal rickettsial or parasitic diseases	7.9	9.9	10.9	9.0	7.8	8.2	7.8	8.0	11.6	8.7	9.3
	9.1	11.2	19.7	13.0	11.2	8.2	10.8	10.8	6.6	13.7	14.2
II. NEOPLASMS											
6. Malignant neoplasm of buccal cavity and pharynx	17.4	17.0	19.9	19.1	18.8	18.8	18.4	15.9	10.6	17.1	18.7
7. Malignant neoplasm of stomach	14.1	18.7	21.1	20.7	19.8	21.2	41.5	18.1	7.0	50.7	21.7
8. Malignant neoplasm of large intestine, except rectum	20.6	24.2	30.2	28.7	27.5	23.0	34.0	27.1	12.5	25.3	28.3
9. Malignant neoplasm of rectum	20.3	26.7	33.9	35.9	29.4	31.6	34.8	27.0	49.3	--	33.0
10. Malignant neoplasm of bronchus, trachea and lung, primary and unspecified as to whether primary or secondary	23.2	29.2	41.1	39.8	35.0	36.7	32.8	29.0	9.0	72.0	36.7
11. Malignant neoplasm of breast	21.6	25.1	33.0	27.1	25.0	24.6	27.0	24.8	20.0	69.0	27.4
12. Malignant neoplasm of cervix uteri	20.3	22.4	31.0	28.2	25.5	28.1	29.2	22.7	29.0	16.5	27.7
13. Malignant neoplasm of uterus other than of cervix uteri	28.7	13.3	24.0	19.6	16.8	21.0	19.1	10.4	8.0	11.3	18.4
14. Malignant neoplasm of ovary, Fallopian tube and broad ligament	7.8	18.5	22.2	22.7	20.7	17.8	18.7	14.5	-	4.0	20.4
15. Malignant neoplasm of prostate	17.7	20.7	30.9	26.9	20.6	32.9	26.9	25.7	11.0	-	26.6
16. Malignant neoplasm of kidney, bladder and other urinary organs	27.5	22.8	35.8	33.4	29.2	30.0	31.3	25.4	-	37.0	31.0
17. Leukaemia and aleukaemia	19.3	20.6	31.3	24.2	30.2	27.1	28.4	16.9	4.5	73.0	24.6
	12.4	18.9	21.6	20.6	18.3	19.0	16.9	18.2	39.0	17.0	19.8

TABLE A22 (Cont'd)

Canadian List Number and Diagnosis	Prince Edward Island	Nova Scotia	Quebec	Ontario	Manitoba	Saskat- chewan	Alberta	British Columbia	Yukon	Northwest Terri- tories	Total(2)
II NEOPLASMS (Cont'd)											
18. Other malignant neoplasms and neoplasms of lymphatic and haematopoietic tissue	20.8	21.3	31.8	25.8	25.1	24.8	27.5	23.3	10.8	13.2	26.6
19. Benign neoplasm of uterus	8.7	10.3	12.9	10.4	7.9	11.6	8.7	8.5	9.8	9.5	10.5
20. Benign neoplasm of ovary	9.0	11.0	12.5	10.2	9.6	9.9	10.0	9.2	7.0	12.0	10.8
21. Benign neoplasms (excluding uterus and ovary and neoplasm of unspecified nature)	8.1	8.8	11.5	7.7	7.6	8.6	7.6	7.4	5.6	12.4	9.0
III ALLERGIC, ENDOCRINE SYSTEM, METABOLIC AND NUTRITIONAL DISEASES											
22. Asthma	13.2	12.1	16.0	18.3	13.3	12.1	15.4	12.1	12.0	13.9	15.5
23. Other allergic disorders (excluding asthma)	8.2	10.7	13.1	12.9	8.2	8.8	11.6	9.3	5.1	10.4	11.1
24. Diseases of thyroid gland	7.5	9.4	11.8	8.0	5.6	6.3	6.2	7.5	15.4	7.5	8.8
25. Diabetes mellitus	9.6	6.8	13.6	13.2	11.6	12.4	7.3	9.4	10.3	15.6	11.6
26. Diseases of other endocrine glands	15.9	15.9	19.5	25.6	18.7	15.5	23.1	16.3	19.8	12.9	21.0
27. Avitaminoses and other metabolic diseases	9.7	12.5	15.5	16.4	13.2	10.5	10.0	12.7	-	17.1	14.5
	30.6	14.8	15.3	18.0	17.4	13.9	13.2	15.1	4.4	23.3	15.7
IV DISEASES OF THE BLOOD AND BLOOD-FORMING ORGANS											
28. Diseases of the blood and blood-forming organs	12.9	13.7	14.4	20.2	15.5	12.8	18.0	14.1	8.1	12.5	16.6
	12.9	13.7	14.4	20.2	15.5	12.8	18.0	14.1	8.1	12.5	16.6
V MENTAL, PSYCHONEUROTIC AND PERSONALITY DISORDERS											
29. Psychoses	9.1	14.5	19.8	21.3	16.2	12.7	16.9	11.0	7.5	10.7	18.4
30. Psychoneurotic disorders	8.0	18.2	31.0	35.4	20.9	19.9	38.0	16.2	12.2	13.3	28.9
31. Disorders of character, behaviour and intelligence	10.9	12.8	19.1	18.1	12.9	9.9	10.0	9.9	7.1	9.9	16.3
	8.5	12.6	13.7	14.2	13.5	8.8	11.6	6.8	5.2	5.9	12.6

TABLE A22 (Cont'd)

Canadian List Number and Diagnosis	Prince Edward Island	Nova Scotia	Quebec	Ontario	Manitoba	Saskat- chewan	Alberta	British Columbia	Yukon	Northwest Terri- tories	Total(2)
VI DISEASES OF THE NERVOUS SYSTEM AND SENSE ORGANS											
32. Vascular lesions affecting central nervous system	17.6	15.8	18.4	36.8	21.5	13.8	35.3	13.3	9.3	12.0	25.6
33. Inflammatory and other diseases of central nervous system	25.4	22.7	32.0	73.2	36.9	25.3	57.4	23.7	19.2	14.3	49.5
34. Diseases of nerves and peripheral ganglia	24.2	15.5	31.8	65.6	31.8	16.1	75.1	15.2	7.6	14.0	44.6
35. Diseases and conditions of the eye	14.2	12.6	13.9	14.1	10.5	10.8	11.2	12.6	5.4	6.4	13.1
36. Diseases of ear and mastoid process	11.5	9.1	10.9	8.9	8.1	8.6	12.1	8.4	7.7	13.5	9.6
	8.0	8.1	9.9	7.5	6.8	7.4	10.9	8.1	10.1	8.7	8.7
VII DISEASES OF THE CIRCULATORY SYSTEM											
37. Rheumatic fever and chronic rheumatic heart disease	14.3	15.9	21.4	26.2	16.6	15.6	24.5	15.9	12.3	24.2	21.8
38. Arteriosclerotic and degenerative heart disease	14.0	17.0	20.7	23.3	17.6	18.1	20.4	19.9	19.8	56.3	21.0
39. Other diseases of the heart	18.8	18.1	24.9	30.5	19.3	17.8	32.5	18.5	17.1	18.9	25.8
40. Hypertensive heart diseases and other hypertensive disease	13.7	15.1	21.3	22.3	15.0	16.0	21.9	14.5	12.3	19.0	19.3
41. Diseases of arteries	15.8	13.8	22.4	25.7	12.8	12.5	23.8	14.0	5.6	11.1	20.7
42. Varicose veins of lower extremities	24.0	22.2	37.9	67.3	35.0	24.4	57.1	24.8	6.0	22.0	47.5
43. Haemorrhoids	11.3	15.5	15.0	13.1	10.6	13.0	13.9	12.4	13.6	12.3	13.1
44. Phlebitis and thrombophlebitis	6.7	9.4	10.0	9.4	8.3	9.9	8.8	8.2	7.9	9.0	9.3
45. Other diseases of the circulatory system	11.9	13.4	16.6	17.1	12.5	13.6	13.2	15.2	8.0	14.2	15.5
	7.4	8.3	10.5	8.9	9.1	8.2	8.4	8.3	5.0	10.8	9.2
VIII DISEASES OF THE RESPIRATORY SYSTEM											
46. Acute upper respiratory infections	8.5	7.3	7.4	6.0	6.6	6.7	6.7	6.3	8.1	9.6	6.6
47. Influenza	6.5	6.5	6.6	6.3	5.1	5.5	5.9	6.2	6.3	5.6	6.1
48. Pneumonia	8.2	6.6	8.0	7.6	5.6	6.4	6.0	6.1	11.6	7.6	6.7
49. Bronchitis	10.4	11.6	15.1	12.5	9.7	10.7	10.5	11.4	10.8	9.4	12.0
50. Hypertrophy of tonsils and adenoids	8.9	10.0	12.5	11.5	9.0	7.8	8.4	8.5	7.5	7.0	10.1
51. Other diseases of respiratory system	4.3	2.5	2.4	1.9	2.1	2.4	2.7	2.3	3.5	2.9	2.2
	8.8	10.3	11.7	10.8	9.0	8.7	9.4	8.1	7.8	31.0	10.4

TABLE A22 (Cont'd)

Canadian List Number and Diagnosis	Prince Edward Island	Nova Scotia	Quebec	Ontario	Manitoba	Saskat- chewan	Alberta	British Columbia	Yukon	Northwest Terri- tories	Total(2)
IX DISEASES OF THE DIGESTIVE SYSTEM											
52. Diseases of teeth and supporting structure	10.4	11.4	11.0	10.6	9.0	9.1	8.8	10.1	7.5	8.9	10.3
53. Ulcer of stomach, duodenum and jejunum	3.1	3.6	1.9	2.2	2.1	2.3	2.8	2.3	2.3	2.0	2.2
54. Gastritis, duodenitis and other disorders and diseases of the stomach and duodenum	12.7	15.9	13.5	16.5	14.9	12.9	11.9	16.1	10.6	12.6	14.7
55. Appendicitis	10.4	9.2	9.1	9.0	6.9	6.7	5.7	7.5	6.8	4.5	8.3
56. Hernia of abdominal cavity	7.7	8.9	8.5	7.7	7.4	8.2	7.3	7.8	8.0	8.4	8.0
57. Intestinal obstruction without mention of hernia	9.1	10.8	10.6	8.5	9.1	10.6	9.4	9.3	8.8	10.1	9.4
58. Gastro-enteritis and colitis, except ulcerative, age 4 weeks and over	14.3	13.2	15.3	12.7	10.6	9.9	12.6	11.5	9.8	5.0	12.7
59. Chronic enteritis and ulcerative colitis	7.9	7.3	11.0	7.4	6.4	7.2	6.3	6.6	6.2	7.8	7.9
60. Cirrhosis and other diseases of liver	14.5	16.0	16.1	18.7	14.6	14.0	13.9	17.1	6.0	36.6	16.9
61. Diseases of gallbladder and pancreas	23.9	15.2	15.8	20.1	22.8	19.5	21.6	18.9	15.7	3.5	18.1
62. Other diseases of digestive system	19.7	14.7	15.2	14.7	12.1	12.1	12.2	14.0	8.8	16.0	14.2
	9.3	10.1	11.2	10.7	8.4	8.5	9.1	10.0	6.4	9.7	10.3
X DISEASES OF THE GENITO-URINARY SYSTEM											
63. Nephritis and nephrosis	9.3	10.0	11.1	9.2	8.9	9.5	8.6	9.1	6.7	12.2	9.7
64. Infections of kidney	19.1	17.9	20.9	20.9	14.7	19.1	19.2	19.7	12.5	64.0	20.1
65. Calculi of kidney, ureter and other parts of urinary system	9.3	12.0	13.9	11.8	8.7	8.9	8.8	11.0	7.1	8.8	11.2
66. Other diseases of urinary system	9.9	9.2	10.7	9.6	10.3	9.0	8.1	8.9	5.8	21.6	9.7
67. Hyperplasia of prostate	9.3	10.8	12.8	10.7	10.0	8.3	9.3	8.7	7.6	9.2	10.5
68. Redundant prepuce of phimosis	20.2	21.1	23.4	20.6	21.6	24.9	19.4	19.6	16.8	18.9	21.3
69. Diseases of ovary, Fallopian tube and parametrium, and infective diseases of uterus, vagina and vulva	3.0	3.5	3.4	2.9	2.3	3.4	3.2	3.1	2.9	3.1	3.1
70. Uterovaginal prolapse	5.9	8.3	9.4	7.2	6.2	6.7	6.5	7.0	7.1	8.9	7.8
71. Disorders of menstruation	13.9	13.0	16.2	14.4	13.1	15.2	14.0	13.2	12.3	23.9	14.6
72. Other diseases of genital organs	3.9	5.8	7.3	4.4	3.8	4.0	4.2	3.4	3.2	5.0	4.9
	5.9	7.7	8.9	6.1	5.7	6.6	6.0	5.7	5.9	8.3	6.7

TABLE A22 (Cont'd)

Canadian List Number and Diagnosis	Prince Edward Island	Nova Scotia	Quebec	Ontario	Manitoba	Saskat- chewan	Alberta	British Columbia	Yukon	Northwest Terri- tories	Total(2)
XI DELIVERIES AND COMPLICATIONS OF PREGNANCY, CHILDBIRTH AND THE PUERPERIUM											
73. Complications of pregnancy	5.5	5.4	5.6	5.9	5.6	5.9	6.0	6.1	6.2	5.7	5.8
74. Abortion	3.2	3.6	4.5	4.8	3.5	4.2	4.1	4.7	4.5	4.3	4.5
75. Delivery without mention of complications	3.7	4.0	4.5	3.8	4.1	4.1	3.7	4.1	3.9	4.1	4.1
76. Delivery with specified complications	6.1	5.5	5.6	6.0	6.0	6.3	6.5	6.4	6.7	5.8	5.9
77. Complications of the puerperium	5.6	9.6	9.6	8.7	8.0	9.3	9.0	10.0	11.4	8.9	9.1
	2.8	6.9	11.8	14.6	6.5	5.1	5.6	5.8	5.2	11.1	9.4
XII DISEASES OF THE SKIN AND CELLULAR TISSUE											
78. Infection of skin and subcutaneous tissue	8.9	10.8	10.6	9.1	8.5	9.4	7.8	10.0	8.9	10.4	9.6
79. Other diseases of skin and subcutaneous tissue	7.9	8.6	9.4	7.0	6.8	6.9	6.2	8.7	7.6	7.6	7.8
	10.1	12.9	11.5	11.2	10.6	11.8	10.0	11.5	11.6	20.3	11.3
XIII DISEASES OF BONES AND ORGANS OF MOVEMENT											
80. Arthritis and rheumatism, except rheumatic fever	18.4	15.2	17.0	24.9	15.9	12.6	19.7	15.4	13.7	13.5	19.4
81. Displacement of intervertebral disc	21.4	17.7	18.5	36.9	19.6	13.0	24.3	17.5	12.3	15.4	24.8
82. Other diseases of bones and organs of movement	13.7	14.4	16.7	20.2	14.5	14.1	17.2	15.9	15.8	14.7	17.4
	21.2	13.1	15.8	16.3	12.9	11.3	15.6	13.5	13.5	11.0	15.2
XIV CONGENITAL MALFORMATIONS											
83. Congenital malformations	19.5	14.0	16.0	15.7	14.8	15.2	13.6	14.3	6.2	15.1	15.3
	19.5	14.0	16.0	15.7	14.8	15.2	13.6	14.3	6.2	15.1	15.3
XV CERTAIN DISEASES OF EARLY INFANCY											
84. Certain diseases of early infancy	9.9	12.8	15.8	11.6	12.4	11.0	11.1	12.7	13.1	13.2	13.3
	9.9	12.8	15.8	11.6	12.4	11.0	11.1	12.7	13.1	13.2	13.3

TABLE A22 (Cont'd)

Canadian List Number and Diagnosis	Prince Edward Island	Nova Scotia	Quebec	Ontario	Manitoba	Saskat- chewan	Alberta	British Columbia	Yukon	Northwest Terri- tories	Total(2)
XVI SYMPTOMS, SENILITY AND ILL-DEFINED CONDITIONS											
85. Symptoms, senility and ill-defined conditions	6.4	7.8	11.3	8.8	7.0	6.1	12.6	5.7	6.4	5.0	9.2
	6.4	7.8	11.3	8.8	7.0	6.1	12.6	5.7	6.4	5.0	9.2
XVII ACCIDENTS, POISONINGS, AND VIOLENCE (NATURE OF INJURY)											
86. Fracture of or involving skull or face bones and head injury, except open wounds, contusion and haematoma of scalp	9.8	12.0	10.1	13.0	11.8	9.0	10.3	11.2	10.1	9.3	11.3
87. Fracture of spine and trunk	5.9	6.9	8.9	7.5	5.9	5.9	6.5	6.6	6.4	4.7	7.5
88. Fracture of upper limb	13.9	22.4	17.6	22.6	21.8	17.0	26.2	23.9	24.4	8.3	21.3
89. Fracture of femur	4.5	6.4	5.8	6.3	5.2	5.5	5.3	5.1	6.1	8.1	5.8
90. Other fractures of lower limb (excluding femur)	27.8	43.9	33.0	64.0	49.0	38.0	56.1	45.3	26.3	61.4	50.9
91. Dislocation without fracture, and sprains and strains of joints and adjacent muscles	18.6	15.7	12.5	17.5	15.0	13.1	14.4	16.1	13.5	11.0	15.2
92. Internal injury of chest, abdomen and pelvis	5.1	8.5	8.8	9.2	7.1	5.8	6.9	7.9	8.7	7.3	8.2
93. Burns	8.0	16.9	15.9	13.8	13.1	13.1	13.0	14.8	5.3	14.1	14.3
94. Other and unspecified affects of accidents, poisonings and violence	16.6	17.9	18.6	17.0	14.2	13.7	13.3	16.9	24.2	11.3	16.5
	5.4	7.0	6.7	6.2	5.9	6.1	5.7	5.9	6.8	6.7	6.2

(1) The data relate mainly to provincial hospital insurance plan in-patients hospitalized within or outside the respective provinces. For information on variations and exceptions in particular provinces, see footnotes to Table A15.

(2) Excludes Newfoundland and New Brunswick.

(3) Excludes X SUPPLEMENTARY CLASSIFICATIONS FOR SPECIAL ADMISSIONS, LIVEBIRTHS AND STILLBIRTHS (95-98).

Source: Data supplied to Department of National Health and Welfare by Provincial Plans.

TABLE A23

REVENUE FUND EXPENDITURES OF BUDGET REVIEW HOSPITALS, BY TYPE OF ACCOUNT, BY PROVINCE, 1962

PROVINCE	Number of Hospitals Reporting	Departmental Expense						Other Revenue Fund Expense	Total Revenue Fund Expense
		Salaries and Wages	Medical and Surgical Supplies	Drugs	Raw Food	Other Supplies and Expense	Total Departmental Expense		
Nfld.	37	\$ 6,212,797	\$ 418,050	\$ 767,772	\$ 1,358,412	\$ 2,684,016	\$ 11,441,047	\$ 729,722	\$ 12,170,769
P.E.I.	9	1,797,140	111,836	132,127	273,698	660,474	2,975,275	368,418	3,343,693
N.S.	47	15,712,737	882,591	1,060,618	2,047,356	5,793,269	25,496,571	1,858,496	27,355,067
N.B.	37	14,925,517	850,178	1,069,609	1,724,275	4,733,784	23,303,363	2,781,514	26,084,877
Que.	158	132,536,804	6,178,181	8,780,782	12,736,311	32,895,412	193,127,490	19,089,152	212,216,642
Ont.	216	190,633,491	9,075,542	11,161,439	15,962,533	47,494,477	274,327,482	18,214,787	292,542,269
Man.	79	25,001,985	1,213,175	1,779,179	2,186,554	6,036,046	36,216,939	2,775,968	38,992,907
Sask.	145	27,440,027	1,239,376	1,664,723	2,454,608	6,686,864	39,485,598	2,730,653	42,216,251
Alta.	115	35,900,525	1,797,928	2,118,520	3,937,506	8,133,218	51,887,697	6,070,658	57,958,355
B.C.	91	46,243,259	2,078,922	2,559,407	3,728,012	10,450,802	65,060,402	4,013,964	69,074,366
Yukon	2	98,340	3,545	10,342	16,980	38,160	167,367	13,361	180,728
N.W.T.	1	141,819	5,381	7,417	16,762	63,824	235,203	19,550	254,753
CANADA	937	\$496,644,441	\$23,854,705	\$31,111,935	\$46,443,007	\$125,670,346	\$723,724,434	\$58,666,243	\$782,390,677

TABLE A24

REVENUE FUND EXPENDITURES PER PATIENT DAY⁽¹⁾ OF BUDGET REVIEW HOSPITALS,
BY TYPE OF ACCOUNT, BY PROVINCE, 1962

PROVINCE	Departmental Expense						Other Revenue Fund Expense	Total Revenue Fund Expense
	Salaries and Wages	Medical and Surgical Supplies	Drugs	Raw Food	Other Supplies and Expense	Total Depart- mental Expense		
Newfoundland	\$11.07	\$.75	\$1.37	\$2.42	\$4.78	\$20.39	\$1.30	\$21.69
Prince Edward Island	10.11	.63	.74	1.53	3.72	16.73	2.07	18.80
Nova Scotia	14.57	.82	.98	1.90	5.37	23.65	1.72	25.37
New Brunswick	14.63	.83	1.05	1.69	4.64	22.84	2.73	25.57
Quebec	15.98	.74	1.06	1.53	3.97	23.28	2.30	25.58
Ontario	17.03	.81	1.00	1.43	4.24	24.51	1.63	26.14
Manitoba	14.86	.72	1.06	1.30	3.59	21.53	1.65	23.18
Saskatchewan	14.83	.67	.90	1.33	3.61	21.34	1.48	22.82
Alberta	13.41	.67	.79	1.47	3.04	19.38	2.27	21.65
British Columbia	17.07	.77	.94	1.38	3.86	24.02	1.48	25.50
Yukon	18.18	.66	1.91	3.14	7.05	30.94	2.47	33.41
Northwest Territories	21.29	.81	1.11	2.52	9.58	35.31	2.93	38.24
CANADA	\$15.89	\$.76	\$.99	\$1.49	\$4.02	\$23.15	\$1.88	\$25.03

(1) Patient days during year for adults and children.

TABLE A25
REVENUE FUND EXPENDITURES PER CAPITA⁽¹⁾ OF BUDGET REVIEW HOSPITALS,
BY TYPE OF ACCOUNT, BY PROVINCE, 1962

PROVINCE	Departmental Expense						Other Revenue Fund Expense	Total Revenue Fund Expense
	Salaries and Wages	Medical and Surgical Supplies	Drugs	Raw Food	Other Supplies and Expense	Total Departmental Expense		
Newfoundland	\$13.21	\$.89	\$1.63	\$2.89	\$5.71	\$24.34	\$1.55	\$25.89
Prince Edward Island	16.95	1.06	1.25	2.58	6.23	28.07	3.47	31.54
Nova Scotia	21.06	1.18	1.42	2.74	7.77	34.18	2.49	36.67
New Brunswick	24.59	1.40	1.76	2.84	7.80	38.39	4.58	42.97
Quebec	24.70	1.15	1.64	2.37	6.13	35.99	3.56	39.55
Ontario	30.06	1.43	1.76	2.52	7.49	43.26	2.87	46.13
Manitoba	26.74	1.30	1.90	2.34	6.45	38.73	2.97	41.70
Saskatchewan	29.50	1.33	1.79	2.64	7.19	42.45	2.94	45.39
Alberta	26.20	1.31	1.55	2.87	5.94	37.87	4.43	42.30
British Columbia	28.87	1.25	1.54	2.25	6.30	39.22	2.42	41.64
Yukon	6.56	.24	.69	1.13	2.54	11.16	.89	12.05
Northwest Territories	5.91	.22	.31	.70	2.66	9.80	.81	10.61
CANADA	\$26.74	\$1.28	\$1.68	\$2.50	\$6.77	\$38.97	\$3.16	\$42.13

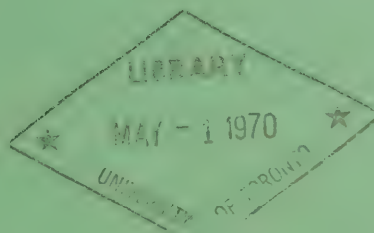
(1) Based on 1962 intercensal population estimates as at June 1, prepared by Dominion Bureau of Statistics.

TABLE A26
PERCENTAGE DISTRIBUTION OF REVENUE FUND EXPENDITURES OF BUDGET REVIEW HOSPITALS,
BY TYPE OF ACCOUNT, BY PROVINCE, 1962

PROVINCE	Departmental Expense						Other Revenue Fund Expense	Total Revenue Fund Expense
	Salaries and Wages	Medical and Surgical Supplies	Drugs	Raw Food	Other Supplies and Expense	Total Depart- mental Expense		
Newfoundland	51.0	3.4	6.3	11.2	22.1	94.0	6.0	100.0
Prince Edward Island	53.7	3.3	4.0	8.2	19.8	89.0	11.0	100.0
Nova Scotia	57.4	3.2	3.9	7.5	21.2	93.2	6.8	100.0
New Brunswick	57.2	3.3	4.1	6.6	18.1	89.3	10.7	100.0
Quebec	62.5	2.9	4.1	6.0	15.5	91.0	9.0	100.0
Ontario	65.2	3.1	3.8	5.5	16.2	93.8	6.2	100.0
Manitoba	64.1	3.1	4.6	5.6	15.5	92.9	7.1	100.0
Saskatchewan	65.0	3.0	3.9	5.8	15.8	93.5	6.5	100.0
Alberta	61.9	3.1	3.7	6.8	14.0	89.5	10.5	100.0
British Columbia	66.9	3.0	3.7	5.4	15.1	94.2	5.8	100.0
Yukon	54.4	2.0	5.7	9.4	21.1	92.6	7.4	100.0
Northwest Territories	55.7	2.1	2.9	6.6	25.0	92.3	7.7	100.0
CANADA	63.5	3.0	4.0	5.9	16.1	92.5	7.5	100.0



Annual Report
of the
Minister of National Health and Welfare
on the operation of
Agreements with the Provinces
under the
Hospital Insurance
and
Diagnostic Services Act



for the fiscal year ended March 31, 1965

ANNUAL REPORT
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HOSPITAL INSURANCE AND DIAGNOSTIC SERVICES ACT
FOR THE FISCAL YEAR ENDED
MARCH 31, 1965

INDEX OF TABLES

	<u>Page</u>
TABLE A - Number of Insured Persons, by Province, on March 31, 1965.....	10
TABLE B - Net Population of Canada as Estimated by Dominion Statistician, by Province, and Percentage Increase over Previous Year, 1958 to 1964.....	12
TABLE C - Summary of Payments made by Canada, by Province, 1964-65 Fiscal Year.....	15
TABLE D - Payments by Canada - in each Fiscal Year, by Province, July 1, 1958 to March 31, 1965 ..	17
TABLE E - Payments by Canada - in respect of each Calendar Year, by Province, July 1, 1958 to March 31, 1965.....	18
TABLE F - Cost of In-Patient Services, 1962; Net Population, June 1, 1962; Total and 25% Per Capita Cost, 1962, by Province	19
TABLE G - Contribution by Canada with respect to In-Patient Services, 1962.....	21
TABLE H - Contribution by Canada with respect to Out- Patient Services, 1962	22
TABLE J - Total Contributions and Final Payments made by Canada, by Province, with respect to 1962..	23
TABLE K - Cost of In-Patient Services by Province, 1962.....	24
TABLE L - Per Capita Cost of In-Patient Services, and Percentage Increase over Previous Year, by Province, 1958 to 1962.....	27
TABLE M - Final Cost of In-Patient Services and Percentage Increase over Previous Year, by Province, 1958 to 1962.....	28

INDEX OF TABLES (Cont'd)

	<u>Page</u>
TABLE 1 - Insured Patient-Days during year, within respective Provinces, Adults and Children, in reporting Hospitals listed in Hospital Insurance Agreements, number and rates per thousand Insured Population, by Province, 1961-1963.....	31
TABLE 2 - Total Patient-Days during year, Adults and Children, in reporting Hospitals listed in Hospital Insurance Agreements, number and percentage distribution and total rate per thousand population, by responsibility for payment, Canada, 1961-1963	32
TABLE 3 - Total Patient-Days during year, Adults and Children, in reporting Hospitals, listed in Hospital Insurance Agreements, number and percentage distribution, by status of Hospital and by type of accommodation, Canada, 1961 - 1963	33
TABLE 4 - Total Admissions, Adults and Children, in Hospitals listed in Hospital Insurance Agreements, number and rates per thousand population, by Province, 1961 - 1963	35
TABLE 5 - Average Length of Stay, Adults and Children, in Hospitals listed in Hospital Insurance Agreements, Canada, 1961 - 1963.....	37
TABLE 6 - Average Length of Stay, Adults and Children, in Budget Review General Hospitals, by Province, 1961 - 1963.....	38
TABLE 7 - Separations by Length of Stay, Patient-Days by Length of Stay and Percent Distribution for both Sexes and all Ages, Provincial Plan In-Patients, Eight Provinces and Two Territories, 1963.....	39
TABLE 8 - Number of Hospitals listed in Hospital Insurance Agreements, Number of Hospitals reporting, Beds and Cribs set up on December 31, and rate per 1,000 Population in participating Provinces, Canada, 1959 - 1963	41

INDEX OF TABLES (Cont'd)

	<u>Page</u>
TABLE 9 - Beds and Cribs set up on December 31, total and per thousand Population, Adults and Children, in Hospitals listed in Hospital Insurance Agreements, by Province, 1961 - 1963.....	42
TABLE 10 - Beds and Cribs set up on December 31, Adults and Children, in Hospitals listed in Hospital Insurance Agreements, number and percentage Distribution, by status of Hospital and by type of Unit, Canada, 1963.....	44
TABLE 11 - Average percentage occupancy, Hospitals listed in Hospital Insurance Agreements, by status of Hospital, Canada, 1961 - 1963.....	45
TABLE 12 - Average Percentage Occupancy, Budget Review General Hospitals, by Province, 1961 - 1963	46
TABLE 13 - Bassinets, Patient-Days during Year, Separations, average length of stay, Newborns, in Hospitals listed in Hospital Insurance Agreements, Canada, 1961 - 1963	48
TABLE 14 - Revenue Fund Expenditures of Budget Review Hospitals, by Province, 1959 - 1963.....	49
TABLE 15 - Revenue Fund Expenditures of Budget Review Hospitals per Patient-Day, by Province, 1959 - 1963.....	50
TABLE 16 - Revenue Fund Expenditures of Budget Review Hospitals per capita, by Province, 1959 - 1963.....	52
TABLE 17 - Separations per thousand Population, Patient-Days per thousand Population and Average Stay of Separations, by Age Group, Adults and Children, both Sexes, Canada 1961 - 1963.....	54

INDEX OF TABLES (Cont'd)

	<u>Page</u>
TABLE 18 - Hospitalization by Age and Sex, for Adults and Children In-Patients, Insured by Provincial Plans, in Ten Provinces and Two Territories, 1963	56
TABLE 19 - Ten Leading Causes of Hospital Separations, by Diagnosis, Canada, 1961 - 1963	57
TABLE 20 - Number of Persons employed full-time and part-time in Hospitals listed in Hospital Insurance Agreements, by Province, as at December 31, 1961, 1962 and 1963	58
TABLE 21 - Distribution of Personnel in Hospitals listed in Hospital Insurance Agreements, by type of Personnel, Canada, 1963.....	60
TABLE 22 - Paid Hours of Work, Total and per Patient-Day, in Budget Review General Hospitals, Canada, 1961, 1962, 1963	61

INDEX OF APPENDIX TABLES

TABLE A1 - Total Patient-Days during year, Adults and Children, in Reporting Hospitals listed in Hospital Insurance Agreements, Number and Percentage Distribution, by responsibility for Payment, by Province, 1963.....	64
TABLE A2 - Total Patient-Days during year, Adults and Children, in Hospitals listed in Hospital Insurance Agreements, number and percentage Distribution and Total Rates per thousand Population, by status of Hospital and by Province, 1963.....	66
TABLE A3 - Total Patient-Days during year, Adults and Children, in Budget Review Hospitals, number and percentage Distribution by type of Accommodation, by Province, 1963.....	67

INDEX OF APPENDIX TABLES (Cont'd)

	<u>Page</u>
TABLE A4 - Total Separations, Adults and Children, in Hospitals listed in Hospital Insurance Agreements, number and rates per thousand Population, by Province, 1961 - 1963.....	68
TABLE A5 - Average Length of Stay, Adults and Children, in Hospitals listed in Hospital Insurance Agreements, by status of Hospital and by Province, 1963.....	69
TABLE A6 - Average Length of Stay, Adults and Children, in Budget Review General Hospitals, by Bed Size of Hospital and by Province, 1963.....	70
TABLE A7 - Number of Hospitals and other Facilities and percentage Distribution of Hospitals listed in Hospital Insurance Agreements, by status of Hospital, by Province, December 31, 1963....	71
TABLE A8 - Number and Percentage Distribution of Beds and Cribs set up, on December 31, in Hospitals listed in Hospital Insurance Agreements, by status of Hospital and by Province, 1963.....	72
TABLE A9 - Number and Percentage Distribution of Budget Review General Hospitals, Grouped according to their Rated Bed Capacity, by Province, 1963.....	73
TABLE A10 - Number and Percentage Distribution of beds in Budget Review General Hospitals, grouped according to their Rated Bed Capacity by Province, 1963.....	74
TABLE A11 - Budget Review Hospitals: Number and Percentage Distribution of Beds and Cribs set up, by Type of Unit, by Province, 1963....	75
TABLE A12 - Contract and Federal Hospitals: Number of Beds and Cribs set up on December 31, by Type of Unit, by Province, 1963	76

INDEX OF APPENDIX TABLES (Cont'd)

	<u>Page</u>
TABLE A13 - Average Percentage Occupancy Hospitals listed in Hospital Insurance Agreements, by status of Hospital and by Province, 1963.....	77
TABLE A14 - Budget Review General Hospitals: Percentage Occupancy by bed size of Hospital and by Province, 1963	78
TABLE A15 - Bassinets, Patient-Days during year, Separations, Average Length of Stay, Newborn in Hospitals listed in Hospital Insurance Agreements, by Province, 1963	79
TABLE A16 - Revenue Fund Expenditures of Budget Review Hospitals, by Type of Account, by Province, 1963.....	80
TABLE A17 - Revenue Fund Expenditures per Patient-Day of Budget Review Hospitals, by Type of Account, by Province, 1963.....	81
TABLE A18 - Revenue Fund Expenditures per Capita of Budget Review Hospitals, by Type of Account, by Province, 1963	82
TABLE A19 - Percentage Distribution of Revenue Fund Expenditures of Budget Review Hospitals, by Type of Account, by Province, 1963	83
TABLE A20 - Hospitalization by Primary Diagnosis According to the Canadian List of 98 Diagnoses, Adult and Child In-Patients Insured by Provincial Plans, Ten Provinces and two Territories, 1963.....	84
TABLE A21 - Distribution of Full-Time and Part-Time Personnel in Hospitals listed in Hospital Insurance Agreements, by Type of Personnel, by Province, 1963	91

INDEX OF APPENDIX TABLES (Cont'd)Page

TABLE A22 - Percentage Distribution of Total Personnel in Hospitals listed in Hospital Insurance Agreements, by Type of Personnel, by Province, 1963.....	92
TABLE A23 - Total Personnel per 100,000 Population in Hospitals listed in Hospital Insurance Agreements, by Type of Personnel, by Province, 1963.....	93
TABLE A24 - Paid Hours of Work, Total and Per Patient- Day, in Budget Review General Hospitals, by Province, 1963.....	94

ANNUAL REPORT
of the
MINISTER OF NATIONAL HEALTH AND WELFARE
on the operation of
Agreements with the Provinces
under the
Hospital Insurance and Diagnostic Services Act
for the fiscal year ended March 31, 1965

This is the seventh report to Parliament required to be made in accordance with Section 9 of the Hospital Insurance and Diagnostic Services Act and it is made with respect to the operation of the Agreements under the Act for the fiscal year ended March 31, 1965.

It should be noted that the data concerning federal contributions, other than the final contribution for 1962, and the number of insured persons as set out in Part I of this report, relate to the fiscal year ended March 31, 1965. The hospital utilization and financial data generally are based on the calendar year and, for this reason, such statistical data concerning the operation of hospitals relate to the calendar year 1963 and are set out in Part II of this report.

Part I of this report also describes the amendments made during the year under review to the federal-provincial Agreements under the Hospital Insurance and Diagnostic Services Act. These amendments have been made in accordance with changes in provincial laws or in provincial administrative arrangements as set out in the Schedules of the Agreements. The activities of the Advisory Committee on Hospital Insurance and Diagnostic Services and the Hospital Services Study Unit are outlined. As in previous years, a description is given of the provisions of provincial programmes as in force at the end of the year under review. Figures are provided concerning the number of persons covered by the hospital insurance programmes at the end of the year under review, and the increases in population since the inception of the programme, is shown. It has also been felt that it would be helpful to include in this report, as in previous reports, an outline of the statutory basis for federal contributions and advance payments made to the provinces. The amounts of payments made to the provinces during the fiscal year under review, are shown and some comparative data are given with regard to final costs since the inception of the programme.

Part II of this report contains statistical data derived from the Annual Return of Hospitals for 1963. As explained in previous reports, the Annual Return of Hospitals was designed for a dual purpose: to fulfil the requirements of the Statistics Act in relation to hospital statistics and administered by the Dominion Bureau of Statistics; and to implement the provincial undertakings embodied in the Agreements under the Hospital Insurance and Diagnostic Services Act and administered by the Department of National Health and Welfare.

PART I - Relating to Fiscal Year 1964-65

1. Amendments to Legislation and Agreements

There were a few changes in federal and provincial hospital insurance legislation and in the federal-provincial agreements during the year under review. An amendment was made in the federal Hospital Insurance Regulations pertaining to the method of calculating the cost of out-patient services in a province. The amendment was to simplify financial and administrative procedures at both levels of government and at the hospital level. Experience had shown that the previous requirement of ascertaining the direct costs of out-patient services with sufficient accuracy, was impracticable and a new method therefore was prescribed in the amendment which would have beneficial results for the governments concerned as well as for the individual hospital.

Changes in provincial legislation during the year included changes in the Nova Scotia legislation regarding rates payable for insured services provided to residents when outside of Canada. Insured out-patient services in the province were also extended to include services in connection with diabetic clinics.

The major amendment in the Ontario legislation made during the year concerned the addition to the Ontario programme of several insured out-patient services including the use of radiotherapy facilities for the treatment of cancer; the use of occupational therapy and physiotherapy facilities; and the use of speech therapy facilities in specified hospitals listed in the agreement. The Ontario law was also amended so as to increase the premium rate payable by a single person to \$3.25 a month and by a person with one or more dependants to \$6.50 a month. This was the first time the premium rate in Ontario had been increased since the inception of the programme.

The Northwest Territories expanded their insured out-patient services during the year so as to include laboratory, radiological and other diagnostic procedures; drugs when administered in the hospital and routine surgical supplies and the use of the operating room.

Most provinces made amendments in their agreements relating to the lists of participating hospitals, adding to the number of beds available for insured services.

2. Advisory Committee on Hospital Insurance and Diagnostic Services and the Hospital Services Study Unit

The Advisory Committee on Hospital Insurance and Diagnostic Services held its two regular meetings in Ottawa on May 25 and 26, 1964 and on November 16 and 17, 1964. Supplementing the usual discussions of technical problems and consideration of progress reports from working parties, there was an interesting talk given at the first meeting by Dr. W.W. Wigle of the Hospital Medical Records Institute in Ontario, of which he is the Director. At the second meeting of the Committee, representatives of the Canadian Council on Hospital Accreditation submitted statistical data and information on the operation of the Council which was both helpful and valuable to the Advisory Committee. There was considerable discussion concerning matters of liaison between the Canadian Council on Hospital Accreditation and the provincial authorities.

An important development during the year, was the establishment in Health Insurance of the Hospital Services Study Unit. This Unit had been recommended to the government at a special session of the Advisory Committee on Hospital Insurance and Diagnostic Services held in January 1964 and was subsequently approved by the government. It was set up to establish principles which could be incorporated into the planned development of essential health services, with cost being kept constantly in mind.

The activities of the Hospital Services Study Unit will include projects which will be undertaken with the assistance and co-operation of the provinces, to assist provinces in developing principles relating to programming and to meet technical, medical and social needs which will contribute to greater efficiency in hospitals. The Unit will be made up of a multi-disciplinary group of seven consultants who, on a team basis, will share the common goal of devising methods for providing the highest possible standards of care having regard also to the costs involved. The Unit will work closely with the Advisory Committee on Hospital Insurance and Diagnostic Services and will be assisted by an Expert Committee. It will be the goal of the Hospital Services Study Unit to find the means whereby Canadians may achieve more efficient and economical hospital care of high quality.

3. Summary of Provincial Programmes

Because of the variation in programmes provided by the provinces in accordance with agreements under the Hospital Insurance and Diagnostic Services Act, it has been the practice to include in this report a summary of provincial programmes as at the end of the fiscal year under review.

(a) In-Patient Services

Since it is a primary requisite for entering into an agreement under the federal Act, that a province provide, on uniform terms and conditions, the in-patient services specified in the federal law, all of the provinces provide the following as insured in-patient services:

- (i) accommodation and meals at the standard or public ward level,
- (ii) necessary nursing service,
- (iii) laboratory, radiological and other diagnostic procedures together with the necessary interpretations for the purpose of maintaining health, preventing disease and assisting in the diagnosis and treatment of any injury, illness or disability,
- (iv) drugs, biologicals and related preparations as provided in an agreement,
- (v) use of operating room, case room and anaesthetic facilities, including necessary equipment and supplies,
- (vi) routine surgical supplies,
- (vii) use of radiotherapy facilities where available,
- (viii) use of physiotherapy facilities where available,
- (ix) services rendered by persons who receive remuneration therefor from the hospital, and
- (x) such other services as are specified in an agreement.

(b) Out-Patient Services

While the federal law authorizes the Minister of National Health and Welfare to enter into an agreement to make contributions towards the costs of the above services on an out-patient basis as well, the law is permissive in this regard and the provinces are free to choose which, if any, out-patient services they propose to provide as insured services. At the end of the fiscal year under review, the following was the situation with regard to insured out-patient services:

In the agreement with British Columbia, no out-patient services were listed as insured services at the request of the province. Nevertheless, emergency services and minor surgical procedures are included in the provincial programme on payment of a \$2 charge. During the early years, Alberta did not provide any out-patient services under the joint federal-provincial programme. However, the services provided in and by the provincial cancer clinics and provincial laboratories became insured out-patient services last year, as mentioned in the Report for that year.

A common feature of out-patient services provided in most of the provinces, is the provision of a fairly broad range of services in the specific event of an accident. In Ontario, these are provided within a period of 24 hours after an accident (Ontario also provides follow-up care in fracture cases), while this period may be extended in Manitoba, Quebec, the Northwest Territories and the Yukon. In Nova Scotia and New Brunswick, emergency services are provided within a period of 48 hours of an accident, and follow-up care is included for a period of 90 days after an accident in New Brunswick.

In addition to these out-patient services provided for emergencies, most provinces now provide an increasing number and widening range of other out-patient services. The Northwest Territories provide certain diagnostic procedures and necessary interpretations.

In Saskatchewan, insured out-patient services include the services provided by a hospital in the course of providing diagnostic or treatment services, to the extent that these can be provided. All radiological and laboratorial procedures and all physiotherapy and occupational procedures are also insured out-patient services to the extent that these can be provided by the participating hospitals.

Manitoba provides surgical procedures, as designated; certain procedures related to medical rehabilitation and electro-shock therapy; the services provided through and by the Manitoba Cancer Treatment and Research Foundation; and the services provided by the preschool development clinic administered by the Childrens Hospital of Winnipeg.

Ontario provides certain medical and therapeutic procedures in cases where the procedure ordinarily would be carried out as an in-patient service, in specified hospitals. During the year under review the province extended insured out-patient services to include the use of radiotherapy for treatment of cancer; and the use of occupational therapy, physiotherapy and speech therapy facilities in specified hospitals.

Quebec provides minor surgical procedures as specified from time to time, including necessary radiological and laboratory examinations which are directly related to these procedures, along with the examination of tissues together with the necessary interpretations. Quebec out-patient services also include psychiatric day care and night care in psychiatric departments of certain specified hospitals. In addition, electro-shock and insulin shock therapy are insured services when provided in psychiatric departments of general hospitals in the province.

In New Brunswick, hospital services and facilities when provided for diagnostic and treatment procedures as authorized from time to time, including the use of the operating room; the use of surgical equipment and supplies; drugs and related preparations; and laboratory, radiological and other diagnostic procedures together with the necessary interpretations; are all insured out-patient services. Laboratory procedures when referred by a physician are insured services where approved facilities are available. Physiotherapy facilities where available are also included as insured out-patient services.

Nova Scotia provides a wide range of out-patient services. The services of the tumour clinic and laboratory tests from time to time specified by the Commission, together with necessary interpretations, are insured. The province also includes as insured out-patient services all medically necessary diagnostic radiological examinations. In addition, treatment facilities where available are insured for radiotherapy and physiotherapy. Minor, medical and surgical procedures and the provision of blood including blood fractions, are also insured out-patients services.

Prince Edward Island provides laboratory and radiological procedures, as specified, including the use of radioactive isotopes; drugs, biologicals and related preparations for emergency diagnosis and treatment; and all of the other services prescribed as in-patient services in the federal Act.

In Newfoundland, selected diagnostic and treatment procedures are provided as insured out-patient services.

(c) Methods of Provincial Financing

Since the provinces were free to devise their own methods for financing the provincial share of costs, a variety of methods of financing has emerged. Five provinces initially used a premium

method, but two of those subsequently switched to general revenue; one province levies a sales (hospital) tax while another levies a property tax. Other provinces finance their share of costs out of general revenue and, in some instances, a combination of methods is used.

The premium method is used in Saskatchewan, Manitoba and Ontario. It had been used in New Brunswick and Prince Edward Island but it was abolished in the former from January 1, 1961 and the latter from December 1, 1962.

The annual premium, or hospitalization tax as it is called, in Saskatchewan was \$17.50 for single persons and \$35.00 for families, but was increased to \$24 and \$48 respectively from January 1, 1961. From January 1, 1964 the premium was lowered to \$20.00 and \$40.00 for single persons and families respectively. The funds derived from the hospitalization tax are augmented by general revenue funds.

The Manitoba monthly premium which was \$2.05 for single persons and \$4.10 for families, was increased to \$3.00 and \$6.00 respectively in June 1960. From January 1962 it was reduced to \$2.00 and \$4.00; at the same time, a 6% charge on personal income tax and an extra 1% tax on taxable income of corporations, were levied to provide for the provincial costs not covered by the premiums. A compulsory payroll deduction is applied for employed groups of three or more persons. Provision is also made to exempt from this group certain categories of persons for such reasons as temporary or part-time employment.

The Ontario monthly premium had been \$2.10 for single persons and \$4.20 for families for the first few years of the programme; this was increased to \$3.25 and \$6.50 as from October 1, 1964. Insured persons in Ontario are entitled to insured services and, in addition, to services over and above those included in the agreement under the Hospital Insurance and Diagnostic Services Act. The provincial programme in that province includes insured services in mental hospitals and tuberculosis sanatoria. There is a compulsory payroll deduction clause in the Ontario law in relation to establishments of fifteen or more employees including the employer. Unlike the majority of provinces, this category of residents is the only category with respect to whom insurance coverage is compulsory in the province, the programme being available to all others on a voluntary basis.

In all the premium provinces, reduced premium rates are levied with respect to the families of armed services personnel and members of the Royal Canadian Mounted Police.

British Columbia finances the provincial share of costs out of the general revenue of the province (part of a provincial sales tax in British Columbia is paid into the general revenue fund for hospital insurance). A similar method of financing is used in Quebec, New Brunswick, Prince Edward Island, Newfoundland, the Yukon and the Northwest Territories. Both British Columbia and the Northwest Territories supplement this source of revenue by the levy of authorized charges discussed below. Alberta raises a portion of its share of costs from a mill rate levied on property, as well as levying an authorized charge.

When the Hospital Insurance and Diagnostic Services programme came into operation in Nova Scotia, a three per cent hospital tax was also inaugurated and the funds derived from this sales tax are used to finance the provincial share of costs. The tax was increased to five per cent from January 1, 1961.

Only three provinces have included in their Agreement, provisions for levying charges directly to patients for insured services. These deterrent or co-insurance charges, described in the law as authorized charges, are related to in-patient services in British Columbia, where a charge of \$1.00 per day of hospital care is imposed; in Alberta, where the charge varies between \$1.50 and \$2.00 per day (\$1.00 per day for a newborn), depending upon the category of the hospital; and in the Northwest Territories where a charge of \$1.50 per day of hospital care is imposed. (The charge of \$2.00 referred to above in connection with the out-patient services in British Columbia, is not a part of the joint federal-provincial programme.)

4. Number of Insured Persons

The methods for determining the number of insured persons in a province and outlined in the Agreements, differ since the method used by a province to finance the provincial share of costs has a direct bearing on the availability of an actual count of insured persons. In the three provinces which levy premiums, Ontario, Manitoba and Saskatchewan, insured persons are registered and identification certificates are provided. However, even in these circumstances the methods of registration differ. In Ontario and Manitoba, registration is for single persons and for the family head, but no actual count of the number of dependents of the family head is made. In order therefore, to calculate the average number of persons in the province who are eligible for and entitled to insured services, a number which is required in connection with the federal contribution to the provinces, an estimate of the average number of dependents in these two provinces is made by the Dominion Statistician. In Saskatchewan

the registration method used by the province consists of a head count including dependents.

Coverage is automatic or compulsory in all provinces except Ontario where persons employed in an undertaking having a total of 15 or more employed persons are the only mandatory groups, coverage being voluntary for the remaining population.

In provinces where no premiums are levied and where the provincial share of costs is paid out of general revenue, sales or property tax, no individual registration of insured persons is required and coverage is universal. Insofar as these provinces are concerned, provision was made in the Agreements for calculation of the number of insured persons on the basis of a population estimate for a given date in the year (June 1) as determined by the Dominion Statistician.

The Hospital Insurance Regulations define "population" to mean the population of Canada or of the province, as certified by the Dominion Statistician, and, calculated for a calendar year in which a census was taken, as the population of Canada or of the province as ascertained by the census; for other than a census year, the population of Canada or of the province on the 1st day of June in that year according to published original intercensal estimates of the Dominion Statistician.

There are certain categories of persons with respect to whom hospital services are provided under a statute other than the hospital insurance legislation, and who are, therefore, not entitled to insured services. For the most part, these consist of members of the Armed Forces and the Royal Canadian Mounted Police. In addition, inmates of federal penitentiaries are provided with hospital services by the federal government. In the Dominion Bureau of Statistics population estimates, therefore, the number of the members of the regular forces, members of the Royal Canadian Mounted Police and persons serving terms of imprisonment in a federal penitentiary, amounting to some .7% of the total population, are deducted so as to provide a "net" population figure for the purpose of calculating the eligible population.

Table A shows by province, the number of insured persons on March 31, 1965 as reported for purposes of advance payments; the advance estimate of net population as of June 1, 1965 as certified by the Dominion Statistician; and the percentage of insured persons to the total net population at the end of the fiscal year under review. It will be noted that in all but three provinces, all of the net population was entitled to insured services at the end of the year.

TABLE A

NUMBER OF INSURED PERSONS, BY PROVINCE, ON MARCH 31, 1965

PROVINCE	Number of Insured Persons March 31, 1965	Advance Estimate Of Net Population June 1, 1965	Percentage Of Persons Insured
Newfoundland	495,000	495,000	100
Prince Edward Island	106,000	106,000	100
Nova Scotia	742,000	742,000	100
New Brunswick	616,000	616,000	100
Quebec	5,654,000	5,654,000	100
Ontario	6,577,579	6,692,000	98.3
Manitoba	931,769	952,000	97.9
Saskatchewan	937,011	946,000	99.0
Alberta	1,441,000	1,441,000	100
British Columbia	1,785,000	1,785,000	100
Yukon	15,000	15,000	100
Northwest Territories	25,000	25,000	100
CANADA	19,325,359	19,469,000	99.3

At the end of the year under review coverage was compulsory or automatic in all provinces with the exception of Ontario, as noted above. Nevertheless, in spite of the partially voluntary aspect of that programme, 98.3% of the net population was insured at the end of the year under review.

The percentage of insured persons in Canada on March 31, 1965 to net population, has increased steadily since the inception of a hospital insurance plan. In the early years of the programme the large increases were due to the increasing number of provinces participating in the joint programme. However, since 1961, the increases represent increases in the number of persons covered in provinces already participating in the plan. The percentages of insured persons to net population at the end of each of the fiscal years since the inception of the programme, are as follows:

March 31, 1959	64.5%
March 31, 1960	67.6%
March 31, 1961	97.7%
March 31, 1962	98.2%
March 31, 1963	98.6%
March 31, 1964	99.1%
March 31, 1965	99.3%

Table B shows, by province, the net population of Canada as estimated by the Dominion Statistician and the percentage increase from year to year, from 1958 to 1964. It will be noted that the net population of Canada increased from 16,918,000 to 19,100,000 during these six years. The population increase, totalling 2,182,000 persons, represents a 12.9% increase.

On an annual basis, the increase for Canada has averaged slightly more than 2% and it will be noted that increases have been recorded in most years in individual provinces. The population shown for 1961 is the population based on the census of that year and it was in order to make certain adjustments in individual provinces that decreases were recorded in the net population figures for Newfoundland and New Brunswick. The slight decrease shown for the Yukon in 1962 was due to the rounding of the figure to the nearest thousand persons.

5. Formula For Federal Contributions

The amount of the federal contributions to the provinces is calculated on the basis of a formula contained in the Hospital Insurance and Diagnostic Services Act. It has been designed in such a way as to provide greater federal assistance to those provinces in which the per capita cost of hospital care is lower and to provide for an equitable federal contribution to the provinces, having regard to the considerable variation in the per capita costs between the provinces.

TABLE B

NET POPULATION OF CANADA AS ESTIMATED BY DOMINION STATISTICIAN, BY PROVINCE,
AND PERCENTAGE INCREASE OVER PREVIOUS YEAR, 1958 TO 1964

PROVINCE	1958		1959		1960		*1961		1962		1963		1964	
	Population		Population	%	Population	%	Population	%	Population	%	Population	%	Population	%
Newfoundland	436,000		448,000	2.8	457,000	2.0	456,265	-0.2	468,000	2.6	479,000	2.4	490,000	2.3
Prince Edward Island	99,000		101,000	2.0	102,000	1.0	103,531	1.5	105,000	1.4	105,000	-	106,000	1.0
Nova Scotia	691,000		696,000	0.7	702,000	0.9	716,552	2.1	724,000	1.0	734,000	1.4	739,000	0.7
New Brunswick	571,000		583,000	2.1	593,000	1.7	590,015	-0.5	600,000	1.7	606,000	1.0	609,000	0.5
Quebec	4,866,000		4,980,000	2.3	5,087,000	2.1	5,240,328	3.0	5,346,000	2.0	5,450,000	1.9	5,546,000	1.8
Ontario	5,759,000		5,908,000	2.6	6,046,000	2.3	6,192,034	2.4	6,294,000	1.6	6,402,000	1.7	6,540,000	2.2
Manitoba	859,000		874,000	1.7	888,000	1.6	911,476	2.6	924,000	1.4	939,000	1.6	947,000	0.9
Saskatchewan	885,000		899,000	1.6	907,000	0.9	921,447	1.6	927,000	0.6	930,000	0.3	939,000	1.0
Alberta	1,190,000		1,232,000	3.5	1,272,000	3.2	1,320,844	3.8	1,358,000	2.8	1,393,000	2.6	1,420,000	1.9
British Columbia	1,530,000		1,556,000	1.7	1,594,000	2.4	1,615,707	1.4	1,645,000	1.8	1,681,000	2.2	1,724,000	2.6
Yukon	12,000		13,000	8.3	13,000	-	14,161	8.9	14,000	-1.1	15,000	7.1	15,000	-
Northwest Territories	20,000		20,000	-	21,000	5.0	22,264	6.0	24,000	7.8	24,000	-	25,000	4.2
CANADA	16,918,000		17,310,000	2.3	17,682,000	2.1	18,104,624	2.4	18,429,000	1.8	18,758,000	1.8	19,100,000	1.8

* Census Year.

The federal contribution as set out in the Act, is the aggregate in the year of twenty-five per cent of the per capita cost of in-patient services in Canada, that is the national per capita cost, and twenty-five per cent of the per capita cost of in-patient services in the province less the amount of authorized charges, multiplied by the average for the year of the number of insured persons in the province.

The effect of this formula is that the high-cost provinces receive a lower percentage of their costs from the federal government than do the low-cost provinces. The inclusion in the formula of the national per capita cost, however, acts as a deterrent to all provinces, as increases or decreases in provincial in-patient costs change the federal contribution directly by only twenty-five per cent, the remaining twenty-five per cent federal contribution being spread over all provinces through the national per capita.

Since the federal contribution is calculated on an annual basis, provision was made in the Hospital Insurance Regulations for advances on account of contributions, so that the provinces would not be required to wait for reimbursement of the amounts which they are required to pay to hospitals on a continuing basis. In order to expedite the payment of advances and, at the same time, to forestall the likelihood of major financial adjustments after the end of the year, the formula which is used for the calculation of the advance, provides for a small holdback of the amount due to the province. The formula for the advance, therefore, differs from the formula for the annual contribution in that twenty-three and one-half per cent of the per capita cost of in-patient services in Canada is paid (was twenty-two per cent prior to January 1, 1962 when it was altered in accordance with the amendment to the Hospital Insurance Regulations discussed in previous Reports) instead of twenty-five per cent provided for in the annual calculation, and the amount of the advance unlike the amount of the contribution itself, is calculated on the basis of provincial payments, which may or may not be shareable costs as defined in the law.

Since the amount of the federal payment is calculated on a formula which includes the per capita cost of hospital care in Canada, continuing studies are carried out to ensure that this figure maintains accuracy in an area where costs are subject to fluctuations. Changes in the national per capita cost are made, subject to the approval of Treasury Board, at varying intervals as the situation requires. The purpose of making periodic adjustments in the national per capita is to maintain realistic advance payments and to eliminate major adjustments in the calculations of the federal contribution.

The costs which are shareable by the federal government, are described in the federal legislation. The Act specifically excludes from shareable costs amounts expended on the capital cost of land, buildings or physical plant; on the payment of any capital debt or interest related to capital debt; on the payment of debt incurred prior to the coming into force of the agreement or on the interest related to such prior debt; or any provision for depreciation on the value of land, buildings or physical plant. The term "physical plant" is defined in the Regulations as excluding furniture and movable equipment, or non-movable equipment specially required for use in a hospital. Thus, these items are shareable.

In this connection, it should be noted that most of the capital items which are, by definition, excluded from shareable costs, such as the costs of construction and other matters pertaining to physical plant, are supported by the federal government through the National Health Grants programme and particularly through the Hospital Construction grant.

Generally speaking, shareable costs are the operating costs of the hospital which have been approved by the provincial authority and which have been determined in accordance with recognized and generally accepted accounting principles and procedures. The operating costs of a hospital as defined in the Regulations, however, specifically exclude some items which, although provided in or in connection with the hospital, are not considered to be an integral part of the operation of the hospital.

The province is required to review and approve as a basis of payment the costs of each hospital, and these approved costs form the basis of the federal sharing formula.

6. Federal Payments

During the year under review, payments to the provinces consisted of the regular monthly advance payments on a current basis and the payment of the final contribution based on shareable costs for the calendar year 1962. For reasons similar to those described in the last Report, the Governor-in-Council authorized a special further advance on account of the contributions for 1962 to the provinces, payable on the submission of acceptable final cost reports. The final payment of the federal contribution for 1962 was completed in March 1965.

Table C is the summary of payments by Canada to participating provinces during the fiscal year under review. It includes advance payments on contributions for the 1964-65 fiscal year, and the final payment on contributions for the 1962 calendar year.

TABLE C

SUMMARY OF PAYMENTS MADE BY CANADA, BY PROVINCE,
1964-65 FISCAL YEAR

PROVINCE	ADVANCED PAYMENTS			FINAL PAYMENTS*	TOTAL PAYMENTS
	IN-PATIENT	OUT-PATIENT	TOTAL		
Newfoundland	\$ 8,840,679.35	\$ 477,109.82	\$ 9,317,789.17	\$ 306,162.04	\$ 9,623,951.21
Prince Edward Island**	1,927,433.52	160,395.81	2,087,829.33	14,756.45	2,102,585.78
Nova Scotia	14,619,703.02	1,165,445.88	15,785,148.90	117,023.15	15,902,172.05
New Brunswick	12,841,023.29	317,431.95	13,158,455.24	592,440.60	13,750,895.84
Quebec	121,438,864.18	1,675,232.54	123,114,096.72	5,044,585.21	128,158,681.93
Ontario	145,671,300.96	3,015,857.23	148,687,158.19	2,990,339.96	151,677,498.15
Manitoba	19,816,332.65	701,683.92	20,518,016.57	429,860.16	20,947,876.73
Saskatchewan	21,191,600.65	1,709,950.28	22,901,550.93	624,555.27	23,526,106.20
Alberta	29,709,327.66	792,608.89	30,501,936.55	946,027.40	31,447,963.95
British Columbia	35,151,131.27	-	35,151,131.27	906,370.92	36,057,502.19
Yukon	298,771.91	3,005.97	301,777.88	5,799.94	307,577.82
Northwest Territories	548,624.72	13,806.62	562,431.34	17,176.82	579,608.16
CANADA	\$412,054,793.18	\$10,032,528.91	\$422,087,322.09	\$11,995,097.92	\$434,082,420.01

*Final payments for the 1962 calendar year.

**Final payments for Prince Edward Island includes additional payments with respect to calendar years 1960 (\$29,443.83) and 1961 (\$26,400.11) less overpayment during calendar year 1962 (\$41,087.49).

The total payments to the provinces for the year under review were \$422,087,322.09 as advance payments and \$11,995,097.92 as final payments making a total of \$434,082,420.01.

Table D shows the total payments by fiscal year, to participating provinces since the inception of the hospital insurance programme on July 1, 1958, totalling almost two billion dollars. It should be recalled that in 1958-59, only five provinces (Newfoundland, Manitoba, Saskatchewan, Alberta and British Columbia) participated at the beginning of the programme, while two additional provinces (Nova Scotia and Ontario) operated programmes for three months only. These seven provinces were joined during the fiscal year 1959-60, by two other provinces which operated programmes for only part of that fiscal year (New Brunswick from July 1 and Prince Edward Island from October 1). During the fiscal year 1960-61 the remaining provinces commenced to participate in the programme (Northwest Territories, April 1, 1960; Yukon, July 1, 1960; and Quebec, January 1, 1961). The fiscal year 1961-62 was the first year during which all of the provinces were participating for the full fiscal year.

Factors which must be considered in connection with the payments shown in this Table are the increase in the number of hospital beds which are being made available to meet the needs of an increasing population; and increasing hospital costs due to readjustments in salaries and wages which form a substantial percentage of overall hospital expenditures.

Table E shows the total contributions by province, by calendar year instead of by fiscal year as was shown in Table D. As explained earlier, hospital insurance contributions are calculated on the basis of the calendar year. It will be noted that the amounts shown for 1958, 1959, 1960, 1961 and 1962 represent both advance payments and final payments. The amounts shown for 1963 and 1964 represent advance payments only and the amounts shown for 1965 represent advance payments for the first three months of that calendar year ended March 31, 1965.

7. Final Contribution for 1962

The final contributions payable for 1962 and paid during the fiscal year under review were calculated on the basis of the formula set out in the Hospital Insurance and Diagnostic Services Act and described above. The per capita cost of in-patient services in 1962 is shown in Table F. It will be noted that the national per capita cost was \$35.60 and that in eight provinces the cost exceeded this national figure. As a result, in these provinces the federal contribution represented a percentage of less than 50%, whereas the provinces in which the per capita cost was less than the national, received contributions exceeding 50% of their costs.

TABLE D
PAYMENTS BY CANADA - IN EACH FISCAL YEAR, BY PROVINCE
JULY 1, 1958 to MARCH 31, 1965

PROVINCE	1958-59	1959-60	1960-61	1961-62	1962-63	1963-64	1964-65	TOTAL
Newfoundland	\$ 2,857,886.84	\$ 4,707,692.94	\$ 5,094,934.21	\$ 6,258,287.26	\$ 7,472,463.28	\$ 8,724,909.88	\$ 9,623,951.21	\$ 44,740,125.62
Prince Edward Island	-	447,338.27	1,010,806.54	1,381,894.39	1,673,681.11	1,922,524.26	2,102,585.78	8,538,830.35
Nova Scotia	1,572,782.64	8,162,540.78	9,595,387.52	11,872,932.01	13,519,974.70	15,174,842.90	15,902,172.05	75,800,632.60
New Brunswick	-	4,575,374.90	7,914,412.71	9,546,774.26	10,894,711.87	12,611,337.91	13,750,895.84	59,293,507.49
Quebec	-	-	13,936,740.72	73,022,517.78	88,713,635.41	113,848,887.58	128,158,681.93	417,680,463.42
Ontario	13,140,213.12	71,892,833.66	84,484,271.86	104,498,880.55	122,103,382.61	136,039,776.87	151,677,498.15	683,836,856.82
Manitoba	7,148,534.97	11,324,466.35	13,048,916.19	15,245,924.23	17,348,934.08	19,664,963.78	20,947,876.73	104,729,616.33
Saskatchewan	8,430,441.93	13,378,379.43	14,453,463.99	15,953,810.19	18,278,458.50	21,312,084.05	23,526,106.20	115,332,744.29
Alberta	8,774,575.68	15,698,727.86	16,905,597.57	19,730,547.07	25,784,973.30	28,310,623.43	31,447,963.95	146,653,008.86
British Columbia	12,784,038.88	20,406,091.56	22,493,438.52	25,697,550.94	30,049,147.43	33,687,396.64	36,057,502.19	181,175,166.16
Yukon	-	-	168,683.75	296,036.35	310,267.36	349,443.34	307,577.82	1,432,008.62
Northwest Territories	-	-	261,849.89	377,941.52	523,148.02	597,444.71	579,608.16	2,339,992.30
CANADA	\$54,708,474.06	\$150,593,445.75	\$189,368,503.47	\$283,883,096.55	\$336,672,777.67	\$392,244,235.35	\$434,082,420.01	\$1,841,552,952.86

TABLE E
PAYMENTS BY CANADA - IN RESPECT OF EACH CALENDAR YEAR, BY PROVINCE
JULY 1, 1958 TO MARCH 31, 1965

PROVINCE	Payments by Canada									
	Total Contributions					Advances on Contributions				
	1958	1959	1960	1961	1962	1963	1964	1965		
Newfoundland	\$ 1,990,135.23	\$ 4,788,013.82	\$ 5,603,586.29	\$ 6,185,656.98	\$ 7,043,349.59	\$ 7,604,757.91	\$ 9,163,254.76	\$ 2,361,371.04		
Prince Edward Island	-	235,524.49	1,146,084.16	1,312,097.61	1,509,060.68	1,804,102.12	2,038,278.01	493,683.28		
Nova Scotia	-	8,149,539.76	9,991,458.82	11,569,797.35	12,867,987.74	13,794,076.16	15,461,094.13	3,966,678.64		
New Brunswick	-	3,331,614.19	7,409,672.94	9,720,034.19	10,987,945.69	11,562,560.90	12,962,173.28	3,319,506.30		
Quebec	-	-	-	77,241,386.65	90,370,182.25	100,752,787.22	117,156,176.42	32,159,930.88		
Ontario	-	72,610,303.71	86,732,452.12	100,109,894.16	115,504,531.93	126,846,653.04	144,514,104.74	37,518,917.12		
Manitoba	4,779,865.66	11,556,009.75	13,229,363.97	15,053,607.08	16,693,750.81	18,210,554.41	20,022,406.77	5,184,057.88		
Saskatchewan	5,775,875.67	13,276,380.46	14,893,775.21	16,055,698.34	17,678,472.09	19,659,081.95	22,178,651.60	5,814,808.97		
Alberta	6,494,722.50	15,345,668.80	18,200,793.60	20,758,780.56	23,490,819.80	25,347,982.47	29,634,969.14	7,379,271.99		
British Columbia	8,609,463.00	20,033,811.20	23,309,699.60	26,075,248.99	28,755,093.50	31,145,507.94	34,023,998.12	9,222,343.81		
Yukon	-	-	124,314.31	288,978.79	321,057.29	294,785.63	329,293.34	73,579.26		
Northwest Territories	-	-	208,049.96	391,527.84	481,149.26	552,913.33	562,629.45	143,722.46		
CANADA	\$27,650,062.06	\$149,376,866.18	\$180,849,250.98	\$284,762,708.54	\$325,703,400.63	\$ 357,575,763.08	\$ 408,047,029.76	\$ 107,637,871.63		
CUMULATIVE TOTAL	\$27,650,062.06	\$176,976,928.24	\$357,826,179.22	\$642,588,887.76	\$968,292,288.39	\$1,325,868,051.47	\$1,733,915,081.23	\$1,841,552,952.86		

TABLE F

**COST OF IN-PATIENT SERVICES, 1962; NET POPULATION, JUNE 1, 1962;
TOTAL AND 25% PER CAPITA COST, 1962, BY PROVINCE**

PROVINCE	Cost of In-Patient Services 1962	Net Population June 1, 1962	Per Capita Cost	
			Total 1962	25%
Newfoundland	\$ 10,036,939.85	468,000	\$ 21.4465	\$ 5.3616
Prince Edward Island	2,611,862.11	105,000	24.8749	6.2187
Nova Scotia	22,169,262.33	724,000	30.6205	7.6551
New Brunswick	21,675,939.40	600,000	36.1266	9.0317
Quebec	171,103,659.31	5,346,000	32.0059	8.0015
Ontario	245,201,158.25	6,294,000	38.9579	9.7395
Manitoba	33,113,476.00	924,000	35.8371	8.9593
Saskatchewan	37,901,226.61	927,000	40.8859	10.2215
Alberta	51,316,218.56	1,358,000	37.7881	9.4470
British Columbia	59,198,034.52	1,645,000	35.9866	8.9967
Yukon	778,901.05	14,000	55.6358	13.9090
Northwest Territories	1,108,146.90	24,000	46.1728	11.5432
CANADA	\$ 656,214,824.89	18,429,000	\$ 35.6077	\$ 8.9019

Table G shows the total contribution for in-patient services in 1962 as calculated in the formula described above. The total contribution of over \$321 million was made to the provinces, all being participating provinces.

Table H shows the amount of the federal contribution made for out-patient services in 1962. In this connection, it should be recalled that the scope of out-patient services varies very considerably from province to province. It is this variation which accounts for the fact that the out-patient contribution to Nova Scotia equalled almost one-half that payable to Ontario although the population of Ontario is many times greater than this ratio. The scope of services in Nova Scotia, however, is relatively broad, while the Ontario out-patient services are more limited. It is to be noted that the federal contribution towards the cost of out-patient services in a province is in the same proportion as the federal contribution for in-patient services in that province.

Table J shows the total contribution payable by Canada to participating provinces with respect to 1962, totalling more than 325 million dollars. It will be recalled, however, that advances had been made to the provinces in an amount exceeding 313 million dollars so that the final payments for 1962 total about twelve million dollars.

Table K sets out the details of the cost of in-patient services in 1962 in each of the provinces. It will be noted that the provincial costs shown on the last line of this table are the final in-patient costs reported in Table "F". This table shows the amount included or deducted in computing the in-patient costs.

The amounts shown for room differentials in the offset income section amount to 50% of the net earnings of the hospitals from charges for private and semi-private accommodation over and above standard ward rates. In some provinces the remaining 50% of this income is left with the hospitals, while in others, varying methods are applied. In Newfoundland, Nova Scotia, Ontario and Saskatchewan the full 50% is left with the hospitals; in Quebec and British Columbia 40% is left; in New Brunswick 25%; in Manitoba 20%; while in Prince Edward Island and Alberta the hospitals do not retain any of this income.

The provincial payments to federally-owned hospitals are shown in paragraph 2 of Table K. These are payments for insured in-patient services rendered to insured persons in hospitals operated by the Departments of Veterans Affairs, National Defence and National Health and Welfare.

TABLE G
CONTRIBUTION BY CANADA WITH RESPECT TO IN-PATIENT SERVICES, 1962

PROVINCE	25% of National Per Capita	25% of Provincial Per Capita	Less 25% Per Capita Authorized Charges	Aggregate Per Capita Cost	Average Number of Insured Persons	In-Patient Contribution by Canada
Newfoundland	\$8,9019	\$ 5,3616	-	\$14,2635	468,000	\$ 6,675,318.00
Prince Edward Island	8,9019	6,2187	-	15,1206	91,664	1,386,014.68
Nova Scotia	8,9019	7,6551	-	16,5570	724,000	11,987,268.00
New Brunswick	8,9019	9,0317	-	17,9336	600,000	10,760,160.00
Quebec	8,9019	8,0015	-	16,9034	5,346,000	90,365,576.40
Ontario	8,9019	9,7395	-	18,6414	6,090,437	113,534,272.29
Manitoba	8,9019	8,9593	-	17,8612	919,343	16,420,569.19
Saskatchewan	8,9019	10,2215	-	19,1234	894,956	17,114,601.57
Alberta	8,9019	9,4470	1,0508	17,2981	1,358,000	23,490,819.80
British Columbia	8,9019	8,9967	0,4183	17,4803	1,645,000	28,755,093.50
Yukon	8,9019	13,9090	-	22,8109	14,000	319,352.60
Northwest Territories	8,9019	11,5432	0,6515	19,7936	24,000	475,046.40
Total Contributions By Canada for In-Patient Services, 1962						\$321,284,092.43

TABLE H

CONTRIBUTION BY CANADA WITH RESPECT TO OUT-PATIENT SERVICES, 1962

PROVINCE	In-Patient Contribution	In-Patient Cost Less Authorized Charges	Out-Patient Cost	Out-Patient Contribution
Newfoundland	\$ 6,675,318.00	\$ 10,036,939.85	\$ 553,368.54	\$ 368,031.59
Prince Edward Island	1,386,014.68	2,611,862.11	231,872.86	123,046.00
Nova Scotia	11,987,268.00	22,169,262.33	1,628,803.74	880,719.74
New Brunswick	10,760,160.00	21,675,939.40	458,865.74	227,785.69
Quebec	90,365,576.40	171,103,659.31	8,721.00	4,605.85
Ontario	113,534,272.29	245,201,158.25	4,255,190.41	1,970,259.64
Manitoba	16,420,569.19	33,113,476.00	550,894.00	273,181.62
Saskatchewan	17,114,601.57	37,901,226.61	1,248,722.28	563,870.52
Yukon	319,352.60	778,901.05	4,157.75	1,704.69
Northwest Territories	475,046.40	1,045,608.90	13,432.80	6,102.86
			\$8,954,029.12	\$4,419,308.20

TABLE J
TOTAL CONTRIBUTIONS AND FINAL PAYMENTS MADE BY CANADA
BY PROVINCE WITH RESPECT TO 1962

PROVINCE	Contribution by Canada			Less: Regular Advances	Final Payments*
	In-Patient	Out-Patient	Total		
Newfoundland	\$ 6,675,318.00	\$ 368,031.59	\$ 7,043,349.59	\$ 6,737,187.55	\$ 306,162.04
Prince Edward Island	1,386,014.68	123,046.00	1,509,060.68	1,550,148.17	-41,087.49
Nova Scotia	11,987,268.00	880,719.74	12,867,987.74	12,750,964.59	117,023.15
New Brunswick	10,760,160.00	227,785.69	10,987,945.69	10,395,505.09	592,440.60
Quebec	90,365,576.40	4,605.85	90,370,182.25	85,325,597.04	5,044,585.21
Ontario	113,534,272.29	1,970,259.64	115,504,531.93	112,514,191.97	2,990,339.96
Manitoba	16,420,569.19	273,181.62	16,693,750.81	16,263,890.65	429,860.16
Saskatchewan	17,114,601.57	563,870.52	17,678,472.09	17,053,916.82	624,555.27
Alberta	23,490,819.80	—	23,490,819.80	22,544,792.40	946,027.40
British Columbia	28,755,093.50	—	28,755,093.50	27,848,722.58	906,370.92
Yukon	319,352.60	1,704.69	321,057.29	315,257.35	5,799.94
Northwest Territories	475,046.40	6,102.86	481,149.26	463,972.44	17,176.82
CANADA	\$321,284,092.43	\$4,419,308.20	\$325,703,400.63	\$313,764,146.65	\$11,939,253.98

* Including special advances

TABLE K
COST OF IN-PATIENT SERVICES BY PROVINCE, 1962

	Newfoundland	Prince Edward Island	Nova Scotia	New Brunswick	Quebec	Ontario
1. Hospitals Listed in Part I of Schedule "A":						
Operating Expenses	\$11,933,676.45	\$3,508,631.57	\$27,358,019.76	\$26,139,491.46	\$213,146,761.27	\$292,877,218.00
Less:						
Depreciation and Interest	687,410.21	277,836.33	1,322,601.10	2,770,151.32	12,506,949.10	11,516,593.00
Direct Costs of Research, Ambulance and O.P.D.	107,394.11	—	126,968.26	49,284.07	3,308,367.08	3,486,456.00
Unapproved Expenses	36,708.08	50,322.35	348,423.21	103,745.72	1,906,726.36	1,735,861.00
Offset Income:						
Federal Government	54,126.70	53,111.25	107,520.00	46,523.45	106,043.00	546,897.00
Workmen's Compensation	168,858.10	26,985.90	337,217.80	402,116.95	2,152,881.04	4,832,445.00
Non-Residents	53,268.96	49,007.50	384,128.45	698,714.80	2,282,774.20	3,657,329.00
Care Deemed Unnecessary	3,015.85	14,271.25	11,640.30	4,135.60	172,191.90	105,069.00
Room Differential	148,721.04	63,671.75	606,551.22	677,822.65	9,084,300.03	8,847,815.00
Non-Benefit Drugs	—	—	—	6.00	12,066.86	4,340.00
Out-Patient Services	858,667.27	243,697.67	1,860,658.16	1,096,952.00	10,700,251.44	15,230,118.00
Recoveries and Sales	723,225.63	154,881.89	1,243,960.76	1,384,154.22	9,411,869.98	10,803,370.00
Other Income	270,373.23	173,637.89	87,668.18	—	3,656,963.41	2,353,042.75
Total Deductions	3,111,769.18	1,107,423.78	6,437,337.44	7,221,508.75	55,301,384.40	63,119,335.75
Net Operating Costs	8,821,907.27	2,401,207.79	20,920,682.32	18,917,982.71	157,845,376.87	229,757,882.25
2. Provincial Payments:						
Equipment	572,715.00	—	99,308.93	1,339,632.20	—	—
Contract Hospitals	328,450.08	22,468.60	158,197.01	75,331.79	8,038,758.54	8,064,492.00
Federal Hospitals	37,040.00	—	806,940.00	702,985.78	2,610,657.00	5,863,022.00
Out-of-Province Care	310,050.34	189,563.18	287,298.51	691,692.40	3,184,728.36	2,759,767.00
3. Authorized Charges:						
Contract Hospitals	—	—	—	—	—	—
Federal Hospitals	—	—	—	—	—	—
4. Sub-Total	10,070,162.69	2,613,239.57	22,272,426.77	21,727,624.88	171,679,520.77	246,445,163.25
5. Amounts Recovered	33,222.84	1,377.46	103,164.44	51,685.48	575,861.46	1,244,005.00
6. Cost of In-Patient Services (Agrees with Table F)	\$10,036,939.85	\$2,611,862.11	\$22,169,262.33	\$21,675,939.40	\$171,103,659.31	\$245,201,158.25

TABLE K (Cont'd)

1. Hospitals listed in Part I of Schedule "A":	Manitoba	Saskatchewan	Alberta	British Columbia	Yukon	Northwest Territories
Operating Expenses	\$39,271,599.00	\$45,625,791.51	\$60,147,034.57	\$68,099,476.88	\$175,924.18	\$ 254,753.57
Less:						
Depreciation and Interest	1,893,215.00	1,678,432.05	6,351,626.31	3,592,933.26	8,556.40	19,549.55
Direct Costs of Research,	705,503.00	5,011.31	575,644.80	309,588.68	-	-
Ambulance and O.P.D	555,876.00	1,230,040.20	1,153,599.93	650,689.20	-	429.86
Unapproved Expenses						
Offset Income:						
Federal Government	68,719.00	447,941.38	460,625.50	120,523.17	529.00	2,670.00
Workmen's Compensation	450,941.00	412,798.15	1,049,504.00	1,413,510.00	6,877.00	10,989.50
Non-Residents	1,256,828.00	591,744.94	893,361.69	519,446.85	3,307.40	2,945.00
Care Deemed Unnecessary	30,137.00	9,831.19	1,051.44	364,488.35	-	825.00
Room Differential	619,051.00	334,246.39	978,094.97	1,016,043.86	168.50	-
Non-Benefit Drugs	-	506,747.68	9,827.20	104,966.81	-	-
Out-Patient Services	921,680.00	2,175,253.30	2,036,992.49	2,786,703.94	13,581.25	20,114.58
Recoveries and Sales	1,797,488.00	1,299,101.81	1,917,596.79	2,473,988.18	11,039.40	5,402.79
Other Income	350,087.00	553,340.32	865,898.40	265,343.42	2,105.67	- 18.20
Total Deductions	8,649,525.00	9,244,488.72	16,293,823.52	13,618,225.72	46,164.62	62,908.08
Net Operating Costs	30,622,074.00	36,381,302.79	43,853,211.05	54,481,251.16	129,759.56	191,845.49
2. Provincial Payments:						
Equipment	19,849.00	41,741.55	2,572,607.30	1,309,831.08	6,504.71	1,768.91
Contract Hospitals	467,285.00	239,461.78	1,879,148.05	369,771.67	289.95	278,932.74
Federal Hospitals	1,637,057.00	398,619.10	1,701,643.90	2,574,617.85	536,222.00	277,710.50
Out-of-Province Care	499,455.00	905,401.88	664,259.21	566,525.40	106,304.83	305,671.26
3. Authorized Charges:						
Contract Hospitals	-	-	501,759.30	11,131.00	-	30,187.50
Federal Hospitals	-	-	298,901.80	164,787.00	-	22,141.50
4. Sub-Total	33,245,720.00	37,966,527.10	51,471,530.61	59,477,915.16	779,081.05	1,108,257.90
5. Amounts Recovered	132,244.00	65,300.49	155,312.05	279,880.64	180.00	111.00
6. Cost of In-Patient Services (Agrees with Table F)	\$33,113,476.00	\$37,901,226.61	\$51,316,218.56	\$59,198,034.53	\$778,901.05	\$1,108,146.90

When insured services are furnished to a person in respect of an injury or disability, where such person is legally entitled to recover the cost of such services from some other person by way of damages, the hospital account is paid by the provincial authority, and action is then taken to recover the cost from the responsible third party. The amounts so recovered in respect of insured in-patient services are shown on the second last line of Table K.

8. Comparative Data

It has been explained previously that essential parts of the formula for the payment of contributions to the provinces, is the per capita cost of in-patient services in the provinces, and the per capita cost of in-patient services in Canada. For the final calculation of the federal contribution, these per capita costs are based on actual shareable costs as defined in the Hospital Insurance Regulation. It is possible to make comparisons with the amounts of the final contributions as set out in earlier reports to Parliament. As explained earlier in this report, in connection with the final contribution for the calendar year 1959, only seven provinces participated in the joint programme for the whole of the calendar year, Nova Scotia and Ontario having commenced on January 1, 1959. Insofar as the calendar year 1958 was concerned, only the original five provinces were participating, (Newfoundland, Manitoba, Saskatchewan, Alberta and British Columbia) and these joint programmes only commenced on July 1st of that year.

These facts should be kept in mind when reviewing the data presented in the two Tables L and M.

Table L shows the per capita cost of in-patient services and the percentage increase of these per capita costs over the previous year, by province, for the calendar years from 1958 to 1962 inclusive. The per capita costs shown for 1962, are based without exception on the shareable in-patient costs in all provinces, and show a national per capita cost of \$35.61. This represents an increase of 11.4% over the national per capita cost for 1961 which was \$31.97. This cost, in turn represented an increase of 12.9% over the per capita cost for 1960 which was \$28.31.

It should be noted that although the national per capita cost increased from year to year, the percentage of the increase from one year to another, was on a diminishing basis.

Table M shows the final cost of in-patient services for the calendar years from 1958 to 1962 inclusive, by province, and it also shows the percentage increase over the previous year for each cost figure. The amounts shown for the calendar year 1962 were, in all instances, the actual

TABLE I
PER CAPITA COST OF IN-PATIENT SERVICES, AND PERCENTAGE INCREASE
OVER PREVIOUS YEAR, BY PROVINCE, 1958 TO 1962

PROVINCE	1958	1959		1960		1961		1962	
	Cost	Cost	Increase	Cost	Increase	Cost.	Increase	Cost	Increase
Newfoundland	\$13.7603	\$16.3039	18.5	\$18.4199	13.0	\$19.5339	6.0	\$21.4465	9.8
Prince Edward Island	15.2249	15.6719	2.9	19.2321	22.7	23.0063	19.6	24.8749	8.1
Nova Scotia	17.2940	20.6938	19.7	25.1681	21.6	28.3157	12.5	30.6205	8.1
New Brunswick	16.4678	21.2408	29.0	27.4360	29.2	32.7226	19.3	36.1266	10.4
Quebec	17.6582	18.7399	6.1	21.3643	14.0	26.9919	26.3	32.0059	18.6
Ontario	22.0245	27.4516	24.6	31.8345	16.0	35.0343	10.1	38.9579	11.2
Manitoba	22.8411	27.8516	21.9	31.1363	11.8	33.4899	7.6	35.8371	7.0
Saskatchewan	32.0523	34.7216	8.3	37.3806	7.7	38.8121	3.8	40.8859	5.3
Alberta	25.6619	28.8487	12.4	32.9063	14.1	35.0002	6.4	37.7881	8.0
British Columbia	25.2616	28.3514	12.2	31.7386	11.9	34.2686	8.0	35.9866	5.0
Yukon									
Northwest Territories	13.0843	8.7075	- 33.5	47.9502	295.2	49.2003	2.6	55.6358	13.1
				26.4408	308.0	40.5183	53.2	46.1728	14.0
CANADA	\$21.2329	\$24.6495	16.1	\$28.3140	14.9	\$31.9673	12.9	\$35.6077	11.4

TABLE M
FINAL COST OF IN-PATIENT SERVICES AND PERCENTAGE INCREASE OVER PREVIOUS YEAR, BY PROVINCE, 1958 TO 1962

PROVINCE	1958		1959		1960		1961		1962	
	Final Cost	Percentage Increase	Final Cost	Percentage Increase	Final Cost	Percentage Increase	Final Cost	Percentage Increase	Final Cost	Percentage Increase
Newfoundland	\$ 5,999,505.48	21.7	\$ 7,304,150.36	21.7	\$ 8,417,909.69	15.2	\$ 8,912,638.46	5.9	\$ 10,036,939.85	12.6
Prince Edward Island	1,507,266.00*	5.0	1,582,861.00	5.0	1,961,669.26	23.9	2,381,866.48	21.4	2,611,862.11	9.7
Nova Scotia	11,950,175.00*	20.5	14,402,853.40	20.5	17,668,032.81	22.7	20,289,660.23	14.8	22,169,262.33	9.3
New Brunswick	9,403,103.00*	31.7	12,383,380.45	31.7	16,269,527.62	31.4	19,306,832.90	18.7	21,675,939.40	12.3
Quebec	85,924,996.00*	8.6	93,324,876.00*	8.6	108,680,320.00*	16.5	141,446,468.31	30.1	171,103,659.31	21.0
Ontario	126,839,227.00*	27.9	162,184,056.06	27.9	192,471,252.07	18.7	216,933,851.00	12.7	245,201,158.25	13.0
Manitoba	19,620,464.00	24.1	24,342,268.00	24.1	27,649,032.00	13.6	30,525,227.07	10.4	33,113,476.00	8.5
Saskatchewan	28,366,242.83	10.0	31,214,755.68	10.0	33,904,161.33	8.6	35,763,267.00	5.5	37,901,226.61	6.0
Alberta	30,537,627.70	16.4	35,541,554.53	16.4	41,856,756.05	17.8	46,229,813.13	10.4	51,316,218.56	11.0
British Columbia	38,650,193.85	14.1	44,114,706.55	14.1	50,591,381.71	14.7	55,367,981.20	9.4	59,198,034.52	6.9
Yukon	)		)		623,352.55	)	696,724.90	11.8	778,901.05	11.8
Northwest Territories	)		287,346.00*	-31.4	555,255.80	)	902,103.37	62.5	1,108,146.90	22.8
CANADA	\$359,217,496.86	18.8	\$426,682,818.03	18.8	\$500,648,650.89	17.3	\$578,756,434.05	15.6	\$656,214,824.89	13.4

*Estimated for non-participating province.

shareable costs as defined in the Hospital Insurance Regulations and the total amount of more than \$656 million represented an increase of 13.4% over the amount shown as the final cost for 1961. The final cost for 1961, which amounted to some \$579 million, was 15.6% more than the final cost in 1960.

It will be noted that the percentage increases from year to year of the final costs of in-patient services, also appear to show a downward trend from year to year. However, it must be kept in mind that the actual amounts paid for in-patient services reflect, among other things, an increasing population. This increase in population is not reflected in the per capita figures shown in Table L.

PART II

This part of the report includes quantitative analyses of the volume and characteristics of hospital care, as measured in terms of facilities, services to patients, types of expenditure and personnel. The statistical information was obtained from the Annual Return of Hospitals. These forms are submitted by hospitals that are subject to provincial budget approval ("budget review hospitals"); hospitals owned and operated by the federal government; and by some industrial or private hospitals that provide insured hospital services under contract ("contract hospitals"). Additional data on patient-characteristics are based on morbidity statistics that have been made available to this department by the provinces.

1. Utilization of Hospital Care

a) Days of Care

In 1963 the total number of the insured population increased by 2.3 per cent over the previous year, from 18,175,400 to 18,594,405. The total number of insured patient-days increased by 3.7 per cent, from 32,725,162 to 33,942,627.⁽¹⁾ Corresponding increases between 1961 and 1962 were 2.3 per cent in insured population, and 4.7 per cent in insured patient-days. (Table 1)

The total number of patient-days in hospitals listed in the hospital insurance agreements, including non-insured patient-days, increased in 1963 by 2.6 per cent. It should be noted that there was a net decrease of 6.4 per cent in the number of non-insured patient-days in those hospitals; most of this decrease is traceable to patient-days paid for by the federal government (Table 2). Of the total days, 90 per cent were insured days within the province, 5 per cent were federal responsibility days, 1.5 per cent were paid by Workmen's Compensation Boards, 1.5 per cent applied to non-residents of the province; only 0.6 per cent were days of uninsured residents (Table A1).

As in previous years most of the patient-days were provided in budget review hospitals, with only 5.7 per cent in contract hospitals and 8.1 per cent in federal hospitals in 1963. Within the budget review hospitals approximately two-thirds were standard ward care, and one-third preferred accommodation, although this distribution varied considerably among the provinces (Tables 3, A2 and A3).

(1) Provincial Plan patient-days of adults and children within a province in hospitals listed in federal-provincial Hospital Insurance Agreements: out-of-province hospitalization of residents of a province is excluded. Also a small number of patient-days in a few small hospitals that failed to report are not included in this total.

TABLE 1

INSURED PATIENT DAYS DURING YEAR, WITHIN RESPECTIVE PROVINCES, ADULTS AND CHILDREN, IN REPORTING HOSPITALS
LISTED IN HOSPITAL INSURANCE AGREEMENTS, NUMBER AND RATES PER THOUSAND INSURED POPULATION,
BY PROVINCE, 1961-1963

PROVINCE	Insured Patient Days During Year (1)			Insured Patient Days Per Thousand Insured Population (2)			Insured Population (2)		
	1961	1962	1963	1961	1962 (3)	1963 (4)	1961	1962 (3)	1963 (4)
Newfoundland	536,918	558,682	588,959	1,176.8	1,193.8	1,229.6	456,265	468,000	479,000
Prince Edward Island	149,805	164,802	165,890	1,722.3	1,797.9	1,579.9	86,979	91,664	105,000
New Brunswick	1,051,424	1,080,556	1,118,554	1,467.3	1,492.5	1,523.9	716,552	724,000	734,000
Nova Scotia	976,537	1,003,107	1,031,860	1,655.1	1,671.8	1,702.7	590,015	600,000	606,000
Quebec	8,077,091	8,686,653	9,247,563	1,541.3	1,624.9	1,696.8	5,240,328	5,346,000	5,450,000
Ontario	11,141,030	11,664,504	12,099,892	1,889.0	1,915.2	1,927.2	5,897,909	6,090,437	6,278,400
Manitoba	1,613,598	1,705,350	1,750,677 (5)	1,777.7	1,855.0	1,914.9	907,665	919,343	914,231
Saskatchewan	1,997,712	1,965,028	1,951,013	2,242.9	2,195.7	2,132.8	890,678	894,956	914,774
Alberta	2,944,358	3,084,441	3,116,612	2,229.1	2,271.3	2,237.3	1,320,844	1,358,000	1,393,000
British Columbia	2,707,098	2,752,392	2,808,885	1,675.5	1,673.2	1,671.0	1,615,707	1,645,000	1,681,000
Yukon	24,871	27,836	20,126	1,756.3	1,988.3	1,341.7	14,161	14,000	15,000
Northwest Territories	27,402	31,811	42,596	1,230.8	1,325.5	1,774.8	22,264	24,000	24,000
CANADA	31,247,844	32,725,162	33,942,627	1,759.5	1,800.5	1,825.4	17,759,367	18,175,400	18,594,405

Footnotes: Table 1

(1) Excludes out-of-province insured hospital care.

(2) Based on annual average number of insured persons under Provincial Plans approved for purposes of payment of shareable costs.

(3) Final population figure differs slightly from preliminary estimate, 1962.

(4) In 1963 the number of insured population in Ontario, Manitoba and Saskatchewan is preliminary estimate.

(5) Includes an estimated 60,437 days in Deer Lodge Veterans Hospital.

Source: Table A1, and Annual Reports for the Fiscal Years Ended March 31, 1963 and March 31, 1964.

TABLE 2

TOTAL PATIENT DAYS DURING YEAR, ADULTS AND CHILDREN, IN REPORTING HOSPITALS LISTED
IN HOSPITAL INSURANCE AGREEMENTS, NUMBER AND PERCENTAGE DISTRIBUTION AND TOTAL RATE
PER THOUSAND POPULATION, BY RESPONSIBILITY FOR PAYMENT, CANADA, 1961 - 1963

	Number			Percent		
	1961	1962	1963	1961	1962	1963
Provincial Plan	31,247,844	32,725,162	33,942,627	87.8	89.2	90.1
Insured Residents Care Not Under Responsibility of Provincial Plan	145,998	288,042	228,188	0.4	0.8	0.6
Uninsured Residents of Province	301,748	237,529	222,493	0.8	0.6	0.6
Non-Residents of Province	472,450	530,364	555,794	1.3	1.4	1.5
Workmen's Compensation Board	584,703	577,328	577,253	1.6	1.6	1.5
Federal Government	2,226,079	1,951,432	1,865,402	6.3	5.3	5.0
Undistributed Patient Days	620,495	392,754	275,363	1.7	1.1	0.7
Total	35,599,317	36,702,611	37,667,120	100.0	100.0	100.0
Total Per Thousand Population ⁽¹⁾	1,951.9	1,976.4	1,993.4	xx	xx	xx

(1) Based on 1961 Population Census and on the D.B.S. Intercensal Population Estimates as at June 1.

Source: Table A1.

TABLE 3

TOTAL PATIENT DAYS DURING YEAR, ADULTS AND CHILDREN, IN REPORTING HOSPITALS, LISTED
IN HOSPITAL INSURANCE AGREEMENTS, NUMBER AND PERCENTAGE DISTRIBUTION, BY STATUS
OF HOSPITAL AND BY TYPE OF ACCOMMODATION, CANADA, 1961 - 1963(1)

	Budget Review		Contract		Federal Government		Total	
	Number	Percent	Number	Percent	Number	Percent	Number	Percent
<u>Standard Ward</u>								
1961.....	20,686,869	82.7	1,379,903	5.5	2,949,907	11.8	25,016,679	100.0
1962.....	21,458,461	83.4	1,237,814	4.8	3,031,125	11.8	25,727,400	100.0
1963.....	21,939,891	83.7	1,241,812	4.7	3,042,415	11.6	26,224,118	100.0
<u>Preferred Accommodation</u>								
1961.....	9,687,562	93.6	662,974	6.4	1,572	*	10,352,108	100.0
1962.....	10,047,633	92.2	755,312	6.9	97,285	0.9	10,900,230	100.0
1963.....	10,540,197	92.1	896,965	7.8	5,840	0.1	11,443,002	100.0
<u>Total</u>								
1961.....	30,374,431	85.9	2,042,877	5.8	2,951,479	8.3	35,368,787	100.0
1962.....	31,506,094	86.0	1,993,126	5.5	3,128,410	8.5	36,627,630	100.0
1963.....	32,480,088	86.2	2,138,777	5.7	3,048,255	8.1	37,667,120	100.0

(1) Excludes some undistributed patient days.

* Less than a half of a tenth of a percent.

Source: Annual Returns of Hospitals.

The number of insured patient-days per thousand of the insured population increased during 1963 by 1.4 per cent from 1,800.5 to 1,825.4. The corresponding increases in 1962 had been 2.3 per cent. This national increase of 1.4 per cent in insured hospitalization per person is an average, made up of increases and decreases that took place in individual provinces. In Newfoundland, New Brunswick, Nova Scotia, Quebec, Ontario, and Manitoba, there were increases ranging from 4.4 per cent in Quebec to 0.6 in Ontario. The number of hospital-days per insured person decreased in the other provinces. The decreases were 12.2 per cent in Prince Edward Island, 2.9 per cent in Saskatchewan, 1.5 per cent in Alberta, and 0.1 per cent in British Columbia (Table 1).

The number of patient-days per thousand population is affected by a number of factors, such as: incidence of illness, type of illness, rate of admission for each type of illness, and length of stay for each type of illness. Because none of those four factors is identical in all provinces; because of the differences in coverage of the non-active-treatment patient-days; and because of differing patterns of hospital usage and availability of facilities, it would be misleading to use the increase or decrease in the number of patient-days per insured person as an interprovincial comparison of, for example, effectiveness of hospital treatment.

b) Admissions and Separations

The rate of admission per thousand population and an average length of stay may be used to measure the intensity of utilization of hospital services and the degree of diffusion of the utilization among the population.

Table 4 shows the number and rate of admissions per thousand population. The number of admissions per thousand population for hospitals listed in hospital insurance agreements increased from 157.7 in 1961 to 158.4 in 1962, to 161.0 in 1963. Increases in 1963 applied to all provinces except Alberta and Nova Scotia where there were slight reductions. The highest increase between 1962 and 1963 and in fact the highest admission rate ever reached in any province took place in Saskatchewan; the Saskatchewan rate of 226.4 admissions per thousand population coincided with the first full year of operation of the provincial medical care insurance plan.

Table A4 sets out the number and rates of separations by province showing a trend similar to that for admission rates.

TABLE 4

TOTAL ADMISSIONS, ADULTS AND CHILDREN, IN HOSPITALS LISTED IN HOSPITAL INSURANCE AGREEMENTS,
NUMBER AND RATES PER THOUSAND POPULATION, BY PROVINCE, 1961 - 1963

PROVINCE	Admissions During Year			Admissions Per Thousand Population		
	1961	1962	1963	1961	1962	1963
Newfoundland	50,915	54,451	56,352	111.2	115.9	117.2
Prince Edward Island	16,225	16,905	17,099	155.1	159.5	159.8
Nova Scotia	109,270	110,163	111,204	148.3	147.7	147.1
New Brunswick	104,333	104,635	105,950	174.5	172.4	172.6
Quebec	725,535	747,654	771,123	138.0	139.3	141.0
Ontario	949,771	970,460	1,009,102	152.3	153.0	156.5
Manitoba	165,555	170,534	175,689	179.6	182.4	184.9
Saskatchewan	199,448	195,942	211,275	215.6	210.7	226.4
Alberta	261,617	268,952	273,778	196.4	196.3	194.9
British Columbia	285,835	292,067	301,119	175.4	176.1	177.7
Yukon	3,491	3,643	3,296	238.6	242.9	219.7
Northwest Territories	4,554	6,003	6,775	198.0	250.1	282.3
CANADA	2,876,549	2,941,409	3,042,762	157.7	158.4	161.0

Source: 1963 Annual Returns of Hospitals and Annual Reports for the Fiscal Years Ended March 31, 1963 and March 31, 1964.

c) Average Length of Stay

Tables 5 and 6 and A5 show the length of stay for different categories of hospitals as measured by dividing total patient-days since admission by the relevant number of separations, and by dividing total patient-days during the year by separations.

With respect to budget review general hospitals, there was no major change during this period. In the western provinces and the territories the length of stay was shorter than the national average of ten days, while in Ontario and Quebec and the rest of eastern Canada the length of stay was above the national average (except for Prince Edward Island, where the average length of stay was 9.8 days).

There is a positive correlation between size of hospital and average length of stay; in budget review hospitals with rated bed capacity of up to 9 beds the average length of stay was 6.8 days, while in hospitals with 500-and-over rated bed capacity the average length of stay was 12.2 days (Table A6). It should be noted, however, that the average length of stay is modified by the pattern pertaining to hospital care provided under the plan in the various provinces. For instance, in some provinces, convalescent care and chronic care are provided in large general hospitals while in other provinces, this type of care is provided in separate institutions.

Those patients that stayed in hospital for more than twenty days and were discharged in 1963 accounted for over 50 per cent of patient-days, in all hospitals. Those people that stayed only one day in hospital were responsible for 8.4 per cent of separations, those who stayed two days for 10.4 per cent, and people who stayed up to and including three days for 26.5 per cent of separations in 1963. About half of the total separations left before or during their sixth day in hospital. The distribution of short stay separations (less than ten days) by length of stay shows that there is an extra concentration of separations at three and five days. The number of separations for those patients who stayed more than ten days decreases progressively with length of stay until only 1.7 per cent of the total number of separations stayed more than 60 days in hospital (Table 7).

TABLE 5

AVERAGE LENGTH OF STAY, ADULTS AND CHILDREN, IN HOSPITALS LISTED IN HOSPITAL INSURANCE AGREEMENTS, CANADA 1961 - 1963.

	Budget Review General	Budget Review Chronic and Convalescent	Contract	Federal Government
Patient Days Since Admission Divided by Separations				
1961	10.0	171.3	15.2	35.4
1962	10.1	162.7	17.0	34.9
1963	10.1	180.3	18.0	39.5
Patient Days During Year Divided by Separations				
1961	10.1	207.8	18.5	38.2
1962	10.1	172.2	18.3	34.6
1963	10.1	179.4	18.8	36.7

Source: Table A5 and Annual Reports for the Fiscal Years Ended March 31, 1963 and March 31, 1964.

TABLE 6

AVERAGE LENGTH OF STAY, ADULTS AND CHILDREN, IN BUDGET REVIEW GENERAL HOSPITALS, BY PROVINCE, 1961 - 1963

PROVINCE	Patient Days Since Admission Divided by Separations			Patient Days During Year Divided by Separations		
	1961	1962	1963	1961	1962	1963
Newfoundland	11.4	12.9	13.4	11.4	10.8	11.2
Prince Edward Island	9.9	9.8	9.9	9.8	10.0	9.8
Nova Scotia	9.8	10.1	10.3	9.9	10.1	10.4
New Brunswick	9.4	9.8	10.1	9.8	10.0	10.1
Quebec	10.4	10.3	10.3	10.5	10.4	10.3
Ontario	10.4	10.7	10.7	10.5	10.7	10.8
Manitoba	8.9	9.0	8.8	8.9	9.0	9.0
Saskatchewan	9.7	9.6	9.5	9.7	9.6	9.5
Alberta	9.0	9.2	9.0	9.0	9.1	8.9
British Columbia	9.7	9.5	9.5	9.6	9.5	9.5
Yukon	8.5	9.4	7.7	9.2	8.5	7.7
Northwest Territories	6.7	6.6	8.5	6.8	6.7	8.7
CANADA	10.0	10.1	10.1	10.1	10.1	10.1

Source: Table A5 and Annual Reports for the Fiscal Years Ended March 31, 1963 and March 31, 1964.

TABLE 7

Separations by Length of Stay, Patient-Days by Length of Stay and Percent Distribution for both Sexes and all Ages, Provincial Plan In-Patients,⁽¹⁾ Eight Provinces⁽²⁾ and Two Territories, 1963

Length of Stay (in days)	SEPARATIONS	PATIENT-DAYS
1	231,651	231,651
2	285,308	570,618
3	210,799	632,378
4	220,299	881,154
5	268,351	1,341,648
6	232,725	1,396,253
7	186,903	1,308,248
8	139,136	1,113,000
9	110,954	998,394
10	94,168	941,594
11-14	259,131	3,199,248
15-19	175,048	2,931,603
20-29	166,408	3,953,924
30-59	120,162	4,776,042
60 +	45,506	8,109,348
TOTAL	2,746,549	32,385,103
	PERCENT DISTRIBUTION	PERCENT DISTRIBUTION
1	8.4	0.7
2	10.4	1.8
3	7.7	2.0
4	8.0	2.7
5	9.8	4.1
6	8.5	4.3
7	6.8	4.0
8	5.1	3.4
9	4.0	3.1
10	3.4	2.9
11-14	9.4	9.9
15-19	6.4	9.1
20-29	6.1	12.2
30-59	4.4	14.7
60 +	1.7	25.0
TOTAL	100.0	100.0

(1) The data mainly covers hospitalization under the Provincial Plans; some data concerning hospitalization that was not the responsibility of the Provincial Plans is also included.

(2) Excludes New Brunswick and Nova Scotia.

2. Hospital Bed Facilities and Occupancy

a) Hospital Beds

To serve the population there were 1,326 institutions listed in the Dominion-Provincial hospital insurance agreements in 1963 (Table A7). Out of this total 1,291 institutions were listed as hospitals and the remaining 35 as "other facilities".⁽¹⁾ Among the 1,291 hospitals there were 961 "budget review" hospitals, 252 "contract" hospitals, and 78 "federal government" hospitals. As shown in Table A8 the 1,291 institutions had 129,158 beds at the end of 1963. There were 110,859 hospital beds set up in the "budget review" hospitals, 7,001 beds in the "contract" hospitals, and 11,298 beds in the "federal government" hospitals; that is, 85.8 per cent, 5.4 per cent, and 8.8 per cent respectively.

Table 8 shows that the total number of hospital beds set up in hospitals listed in the hospital insurance agreements increased in 1963 by 3.4 per cent rising from 124,883 in 1962 to 129,158 in 1963. The corresponding percentage increase between 1961 and 1963 was 6.7. However, the number of hospital beds per thousand population had been increasing at the rate of 1.5 per cent per year since 1961; so that at the end of 1963 there were 3 per cent more beds per thousand population than in 1961. Thus, at the end of 1961 there were 6.6 beds per thousand population and in 1963 there were 6.8 beds.

The ratio (Table 9) of the number of hospital beds to population in 1963 varied across Canada from 5.0 beds per thousand people in Newfoundland to 8.6 beds in Alberta. In Quebec and the Atlantic provinces the ratio of hospital beds to population was lower than the average for Canada. In Ontario and in the Prairie provinces this ratio was higher; in British Columbia the ratio of hospital beds to population was the same as for Canada. Between 1962 and 1963 the ratio of hospital beds to population increased in Newfoundland by 8.7 per cent, in Nova Scotia by 3.5 per cent, in Ontario by 3.0 per cent, in Saskatchewan the increase was 2.5 per cent, and in New Brunswick and Quebec this increase was 1.5 and 1.6 per cent respectively. In Prince Edward Island and Manitoba there were decreases in the ratio of hospital beds to population while in Alberta and British Columbia this ratio remained unchanged.

(1) "Other facilities" include establishments such as laboratories, Red Cross blood depots, and cancer clinics.

TABLE 8

NUMBER OF HOSPITALS LISTED IN HOSPITAL INSURANCE AGREEMENTS NUMBER
OF HOSPITALS REPORTING, BEDS AND CRIBS SET UP ON DECEMBER 31, AND RATE
PER 1,000 POPULATION IN PARTICIPATING
PROVINCES, CANADA, 1959 - 1963

Year	Number of Hospitals Listed in Provincial Agreements	Number of Hospitals Reporting	Beds and Cribs Set up on December 31	
			Number	Rate Per 1,000 Population
1959	944	920	81,270	6.5
1960	1,052	1,024	86,178	6.8
1961	1,340(1)	1,311	121,046	6.6
1962	1,305(2)	1,282	124,883	6.7
1963	1,291(3)	1,291	129,158	6.8

(1) Excludes 26 "other facilities" listed in 1961.

(2) Excludes 33 "other facilities" listed in 1962.

(3) Excludes 35 "other facilities" listed in 1963.

Source: Table A8 and Annual Report for the Fiscal Year Ended March 31, 1964.

TABLE 9

BEDS AND CRIBS SET UP ON DECEMBER 31, TOTAL AND PER THOUSAND POPULATION, ADULTS AND CHILDREN, IN HOSPITALS LISTED IN HOSPITAL INSURANCE AGREEMENTS, BY PROVINCE, 1961 - 1963

PROVINCE	Number			Beds Per Thousand Population		
	1961	1962	1963	1961	1962	1963
Newfoundland	1,982	2,152	2,403	4.3	4.6	5.0
Prince Edward Island	651	674	629	6.2	6.4	5.9
Nova Scotia	4,138	4,241	4,469	5.6	5.7	5.9
New Brunswick	3,709	3,861	4,008	6.2	6.4	6.5
Quebec	32,338	32,816	33,823	6.1	6.1	6.2
Ontario	41,389	43,035	44,965	6.6	6.8	7.0
Manitoba	6,685	6,970	6,951	7.3	7.5	7.3
Saskatchewan	7,578	7,573	7,769	8.2	8.1	8.3
Alberta	11,382	11,733	12,034	8.5	8.6	8.6
British Columbia	10,710	11,236	11,464	6.6	6.8	6.8
Yukon	157	160	161	10.7	10.7	10.7
Northwest Territories	327	432	482	14.2	18.0	20.1
CANADA	121,046	124,883	129,158	6.6	6.7	6.8

Source: Table A8 and Annual Report for the Fiscal Year Ended March 31, 1964.

At the end of 1963, (Table 10), 83.8 per cent of beds set up in hospitals listed in the hospital insurance agreements were classified as acute treatment hospital beds while the rest were designated as chronic and convalescent (Tables A11 and A12). Among the "acute treatment" category of hospital beds, 70.3 per cent were "general" beds, 12.8 per cent were "obstetric" beds, and 14.0 per cent were "paediatric" beds, 3 per cent were "psychiatric" beds. In the "contract" hospitals 59.8 per cent of beds were designated as chronic and convalescent and 40.2 per cent as acute treatment. It should be mentioned that in some hospitals obstetric, paediatric and psychiatric patients may occupy beds designated as general, while some chronic and convalescent patients were using beds designated for acute treatment.

About half of the "budget review" hospitals (Tables A9 and A10) had less than fifty beds, and approximately 85 per cent of hospitals were smaller than 200 beds. Almost 60 per cent of hospital beds are in hospitals with 200 or more hospital beds, and in hospitals with less than 50 beds there were only slightly more than 10 per cent of the total budget review hospital beds.

b) Occupancy of Hospital Beds

A year-to-year comparison of the average percentage occupancy figures for hospitals listed in hospital insurance agreements (Table 11) shows that there was little change between 1961 and 1963 except for contract hospitals, where the percentage occupancy increased from 76.2 in 1961 to 82.1 in 1963. In budget review general hospitals the percentage occupancy remained unchanged, in budget review chronic and convalescent hospitals it went up from 90.6 in 1961 to 93.0 in 1962 and back to 90.4 in 1963, and in federal government hospitals the percentage declined from 75.4 in 1961 to 73.9 in 1963.

The average percentage occupancy in the budget review general hospitals on a provincial basis (Table 12) varied from 82.3 per cent in Ontario to 74.1 per cent in Alberta. The average percentage occupancy declined between 1961 and 1963 in Newfoundland, New Brunswick, Alberta, and Nova Scotia; in five provinces there were increases; and in Ontario the percentage remained the same during the period. Table A13 shows the average percentage of occupancy by province in 1963 for other categories of hospital.

From the figures in Table A14 it will be seen that percentage occupancy varies directly with the size of the hospital; in budget review general hospitals in 1963 it ranged from 51.1 per cent for hospitals with less than 10 beds to 87.3 per cent for hospitals with

TABLE 10
BEDS AND CRIBS SET UP ON DECEMBER 31, ADULTS AND CHILDREN, IN HOSPITALS LISTED IN HOSPITAL
INSURANCE AGREEMENTS, NUMBER AND PERCENTAGE DISTRIBUTION, BY STATUS OF HOSPITAL AND BY
TYPE OF UNIT, CANADA, 1963

Type of Unit	Number				Percent			
	All Hospitals	Budget Review	Contract	Federal Government	All Hospitals	Budget Review	Contract	Federal Government
ACUTE TREATMENT								
General	76,097	67,789	2,063	6,245	58.9	61.1	29.5	55.3
Obstetric	13,810	13,215	431	164	10.7	11.9	6.2	1.5
Paediatric	15,140	14,463	276	401	11.7	13.0	3.9	3.5
Psychiatric	3,237	1,669	41	1,527	2.5	1.5	0.6	13.5
Total	108,284	97,136	2,811	8,337	83.8	87.6	40.2	73.8
Chronic and Convalescent	20,874	13,723	4,190	2,961	16.2	12.4	59.8	26.2
Combined Total	129,158	110,859	7,001	11,298	100.0	100.0	100.0	100.0
Number of Hospitals Reporting	1,290	961	252	78	xx	xx	xx	xx

Source: Tables A11 and A12

TABLE 11

AVERAGE PERCENTAGE OCCUPANCY, HOSPITALS LISTED IN HOSPITAL
INSURANCE AGREEMENTS, BY STATUS OF HOSPITAL, CANADA, 1961 - 1963

	1961	1962	1963
Budget Review	81.0	81.0	81.2
Budget Review General	80.3	80.3	80.3
Budget Review Chronic and Convalescent	90.6	93.0	90.4
Contract	76.2	80.5	82.1
Federal Government	75.4	75.8	73.9

Source: Table A 13 and Annual Returns of Hospitals for 1961 and 1962.

TABLE 12
AVERAGE PERCENTAGE OCCUPANCY, BUDGET REVIEW GENERAL
HOSPITALS, BY PROVINCE, 1961 - 1963

PROVINCE	1961	1962	1963
Newfoundland	81.2	77.3	74.6
Prince Edward Island	69.8	71.2	76.0
Nova Scotia	77.6	77.7	75.7
New Brunswick	84.3	81.5	80.9
Quebec	80.7	81.4	81.3
Ontario	82.3	82.3	82.3
Manitoba	77.4	78.2	78.4
Saskatchewan	76.0	74.5	77.8
Alberta	76.4	76.3	74.1
British Columbia	81.0	82.0	82.2
Yukon	41.7	41.2	39.2
Northwest Territories	44.2	41.5	61.7
CANADA	80.3	80.3	80.3

Source: Table A14 and Annual Reports for the Fiscal Year Ended March 31, 1963, and March 31, 1964.

more than 1,000 beds. It will be noted that the vacancy of one bed in a small hospital has much more arithmetic effect on the percentage of occupancy than a similar vacancy in a larger hospital.

c) Hospitalization of Newborns

The number of bassinets set up (Table 13) in the hospitals listed in the hospital insurance agreements expanded by about 2,485 units (15.4 per cent) between 1961 and 1963. Also the number of newborn-bassinet patient-days during the same period of time increased by about 9.5 per cent.

3. Hospital Expenditures

The gross operating costs⁽¹⁾ of budget review hospitals (Table 14) increased by 12.2 per cent from \$782,390,677 in 1962 to \$878,103,067 in 1963. The corresponding increase between 1961 and 1962 was 12.5 per cent. In 1963, in Newfoundland the operating costs increased by 14.0 per cent, in Quebec by 16.5 per cent; in all other provinces the degree of increase was below the national average of 12.2 per cent. The increases in Ontario accounted for 34.9 per cent and in Quebec for 36.5 per cent of the total national increase. The 16.5 per cent increase in the operating costs in Quebec in 1963 could be an indication that the Quebec Hospital Insurance Plan, in its third year of operation, was still undergoing a period of initial adjustment paralleling in that respect experience in other provinces.

Of the national increase of 12.2 per cent in the operating costs over the previous year, about one-third is attributable to an increase in the number of patient-days and two-thirds to an increase in costs of services per patient-day during 1963.

The change in costs per patient-day was from \$25.03 in 1962 to \$27.06 in 1963 (Table 15). Among the ten provinces, in 1963, these costs ranged from \$20.46 in Prince Edward Island to \$28.84 in Quebec; in Nova Scotia, New Brunswick, Quebec, and Ontario they were above the national average. During 1963 the percentage increase in the per-patient-day operating costs in all ten provinces, except for Prince Edward Island and Quebec, was lower than the national increase of 8.1 per cent, and excluding the territories, these costs ranged from 12.7 per cent in Quebec to 2.6 per cent in Saskatchewan.

(1) Gross operating costs or "revenue fund expenditures" include some cost items that are not shareable under the federal-provincial agreements.

TABLE 13

BASSINETS, PATIENT DAYS DURING YEAR, SEPARATIONS, AVERAGE LENGTH
OF STAY, NEWBORNS, IN HOSPITALS LISTED IN HOSPITAL INSURANCE
AGREEMENTS, CANADA, 1961 - 1963

	NUMBER		
	1961	1962	1963
Bassinets	16,135	17,604	18,020
Patient Days During Year	2,781,363	2,965,055	3,045,352
Separations	430,728	456,185	454,485
Average Length of Stay	6.3	6.5	6.7

Source: Table A 15 and annual returns of hospitals for 1961 and 1962.

TABLE 14
REVENUE FUND EXPENDITURES OF BUDGET REVIEW HOSPITALS, BY PROVINCE, 1959 - 1963

PROVINCE	1959		1960		1961		1962		1963	
	Amount	Percent Gain over 1959	Amount	Percent Gain over 1959	Amount	Percent Gain over 1960	Amount	Percent Gain over 1961	Amount	Percent Gain over 1962
Newfoundland	8,190,684	15.2	9,436,015		10,503,086	11.3	12,170,769	15.9	13,871,005	14.0
Prince Edward Island	-	-	2,575,236		3,196,662	24.1	3,343,693	4.6	3,591,564	7.4
Nova Scotia	18,601,394	19.1	22,158,661		24,911,388	12.4	27,355,067	9.8	30,366,474	11.0
New Brunswick	-	-	20,842,604		23,752,195	14.0	26,084,877	9.8	28,998,366	11.2
Quebec	-	-	-		181,950,631	-	212,216,642	16.6	247,140,470	16.5
Ontario	196,420,820	17.2	230,264,746		258,880,912	12.4	292,542,269	13.0	325,987,569	11.4
Manitoba	29,008,256	11.6	32,368,470		35,744,290	10.4	38,992,907	9.1	42,915,730	10.1
Saskatchewan	37,301,138	3.8	38,729,329		40,063,624	3.4	42,216,251	5.4	46,029,533	9.0
Alberta	43,145,759	9.1	47,058,143		51,678,260	9.8	57,958,355	12.2	64,752,983	11.7
British Columbia	52,353,677	13.9	59,618,610		64,543,328	8.3	69,074,366	7.0	73,998,737	7.1
Yukon	-	-	-		165,771	-	180,728	9.0	175,085	-3.1
Northwest Territories	-	-	-		244,400	-	254,753	4.2	275,551	8.2
CANADA	385,021,728	-	463,051,814		695,634,547	-	782,390,677	12.5	878,103,067	12.2

Source: Table A16 and Annual Report for the Fiscal Year Ended March 31, 1964.

TABLE 15

REVENUE FUND EXPENDITURES OF BUDGET REVIEW HOSPITALS PER PATIENT
DAY,⁽¹⁾ BY PROVINCE, 1959 - 1963

PROVINCE	1959	1960	1961	1962	1963
	\$	\$	\$	\$	\$
Newfoundland	17.66	19.75	20.00	21.69	23.34
Prince Edward Island	—	16.74	19.04	18.80	20.46
Nova Scotia	18.56	21.45	23.66	25.37	27.36
New Brunswick	—	21.34	23.72	25.57	27.51
Quebec	—	—	22.63	25.58	28.84
Ontario	20.29	22.47	24.26	26.14	27.97
Manitoba	18.64	20.79	21.94	23.18	24.89
Saskatchewan	19.86	20.39	21.18	22.82	23.41
Alberta	17.36	18.49	20.42	21.65	23.28
British Columbia	21.75	22.60	23.85	25.50	26.42
Yukon	—	—	29.43	33.41	45.32
Northwest Territories	—	—	34.45	38.24	27.80
CANADA	19.77 ⁽²⁾	21.31 ⁽³⁾	23.01	25.03	27.06

(1) Patient-days during year for adults and children.

(2) Average for seven participating provinces.

(3) Average for nine participating provinces.

Source: Table A17 and Annual Report for the Fiscal Year Ended March 31, 1964.

Most of the national increase in per-patient-day costs in 1963, namely 67.9 per cent was made up of the increase in salaries and wages, 25.9 per cent represented the increase in other departmental expense items, and the remaining 6.2 per cent was due to an increase in non-departmental revenue fund expenses. Considered separately, in 1963 the cost of labour per patient-day increased by 8.7 per cent, medical and surgical supplies increased by 10.5 per cent, drugs increased by 7.1 per cent, raw food increased by 2.0 per cent, and other supplies and expenses increased by 8.7 per cent.

The salaries and wages in the budget review hospitals accounted in 1963 for 63.9 per cent of the total revenue fund expenditures, other supplies and departmental expense account items accounted for 28.7 per cent, and the remaining items made up the balance of 7.4 per cent of the total revenue fund expense. The main account items of revenue fund expenditures in 1963 are shown in the four appendix tables A16, A17, A18 and A19.

The per capita national average operating cost (Table 16) in the budget review hospitals in 1963 amounted to \$46.47, or 10.3 per cent higher than the year before. Provincially, it ranged from \$28.84 in Newfoundland to \$50.56 in Ontario and was \$45.21 in Quebec. Only in New Brunswick, Ontario and Saskatchewan was the per capita hospital operating cost in 1963 above the national average of \$46.47. This situation was in striking contrast to that existing in 1961, when in Ontario, Manitoba, Saskatchewan, Alberta, and British Columbia, per capita costs were higher than the national average.

It is important to note that among the factors that can significantly affect the per-patient-day and per-capita budget review hospital operating costs in the provinces are the differences in costs of labour, varying degrees of intensity of utilization of hospital services, and differences in breadth and type of hospital services provided in the budget review hospitals. For example, the costs per patient-day of geriatric and convalescent care are lower than the costs of active treatment care. Consequently, in those provinces where only a small proportion of the convalescent and geriatric care is provided in the budget review hospitals, the average operating costs per patient-day in the budget review hospitals tend to be higher. Conversely, in such provinces, because of the exclusion of geriatric and convalescent care costs from the operating costs of the budget review hospitals, the total per capita operating costs in those hospitals are lower.

TABLE 16

REVENUE FUND EXPENDITURES, OF BUDGET REVIEW HOSPITALS PER CAPITA⁽¹⁾ BY PROVINCE, 1959 - 1963

PROVINCE	1959	1960	1961	1962	1963
Newfoundland	18.57	21.06	22.93	25.89	28.84
Prince Edward Island	—	25.00	30.55	31.54	33.57
Nova Scotia	25.87	30.47	33.80	36.67	40.17
New Brunswick	—	35.38	39.70	42.97	47.23
Quebec	—	—	34.59	39.55	45.20
Ontario	32.90	37.68	41.51	46.13	50.56
Manitoba	32.55	35.72	38.78	41.70	45.17
Saskatchewan	41.12	42.32	43.30	45.39	49.33
Alberta	34.57	36.45	38.79	42.30	46.09
British Columbia	33.41	37.21	39.61	41.64	43.66
Yukon	—	—	11.33	12.05	11.67
Northwest Territories	—	—	10.62	10.61	11.48
CANADA	32.68 ⁽²⁾	36.48 ⁽³⁾	38.14	42.13	46.47

(1) Based on intercensal estimates as at June 1, and 1961 Census of population, Dominion Bureau of Statistics.

(2) Based on population of seven provinces.

(3) Based on population of nine provinces.

Source: Table A18 and Annual Report of the Fiscal Year ended March 31, 1964.

4. Patient Characteristics

Data on patient characteristics and hospitalization are reported daily to most provinces by the hospitals on the hospital admission-separation forms. Tables prepared from these returns by the provinces are supplied annually to the Department of National Health and Welfare.

(1) There are some differences among the provinces in the treatment of some categories of separations and patient-days; however, these differences are relatively minor and they do not invalidate the basic ratios shown in the tables on patient characteristics and morbidity.

a) Age and Sex

It can be calculated from Table 18 that of every ten patients leaving hospital in 1963 six were females. Of those six females two or more precisely 36.5 per cent were in the 25-44 year age-group; 20.7 per cent belonged to the 15-24 year age-group. In total 57.2 per cent of the women that left hospital in 1963 were in the 15-44 year child-bearing age-group. Only 27.2 per cent of the males that left hospital in 1963 were in the 15-44 year age-group. The difference between these percentages is as a result of the hospitalization of females due to child-bearing, and outside this age-group females go to hospital relatively less frequently than males. Among hospital separations of patients aged 0 - 14 there were 384,771 males and 306,767 females. These figures amount to 117.6 separations per thousand males and 98.4 separations per thousand females. Among separations of patients aged over 44 there were 460,377 of males and 459,136 of females. These figures are equivalent to rates of 194.1 per thousand males and 192.0 per thousand of females, in this age-group.

The average length of stay per separation for all age-groups was two days longer for males than for females, 13 days as against 11. Most of the difference in the length of stay between male and female separations may be traced to 15-44 (child-bearing) age-group, where the length of stay of female separations is considerably shorter than the length of stay of male separations. The average stay in normal delivery cases is under 6 days. Outside this age-group the length of stay of separations for males is about the same as for females except in the 70-plus age-group, where the length of stay of females is longer than for males.

(1) In some provinces only insured hospitalization data are reported; in other provinces data for non-insured hospitalization are also included. Also, for some provinces, the out-of-province insured hospitalization data are reported by the province that paid the costs of hospitalization as well as by the province where the actual hospitalization took place.

TABLE 17

SEPARATIONS PER THOUSAND POPULATION, PATIENT-DAYS PER THOUSAND POPULATION AND AVERAGE STAY OF SEPARATIONS,
BY AGE GROUP, ADULTS AND CHILDREN, BOTH SEXES, CANADA⁽¹⁾ 1961-1963.

	0-4 ⁽²⁾	5-14	15-24	25-44	45-64	65-69	70+	Age Unk.	Total
SEPARATIONS PER 1,000 POPULATION									
1961	150.9	83.1	165.2	169.4	143.8	206.6	279.5	-	150.0
1962	155.8	82.5	172.2	178.3	152.8	216.1	297.4	-	156.4
1963	155.8	81.5	167.2	176.6	155.6	222.8	309.5	-	156.1
PATIENT-DAYS PER 1,000 POPULATION									
1961	1,218.9	497.5	1,106.1	1,380.5	2,100.0	3,941.8	7,597.5	-	1,633.3
1962	1,319.7	501.2	1,168.8	1,508.8	2,332.2	4,482.8	8,995.6	-	1,813.5
1963	1,291.2	485.4	1,130.7	1,487.9	2,379.6	4,718.4	9,377.2	-	1,828.2
AVERAGE STAY OF SEPARATIONS									
1961	8.1	6.0	6.7	8.2	14.6	19.1	27.2	10.8	10.9
1962	8.5	6.1	6.8	8.5	15.3	20.7	30.3	11.9	11.6
1963	8.3	6.0	6.8	8.4	15.3	21.2	30.3	9.7	11.7

(1)Includes all provinces and territories.

(2)Newborns excluded.

Source: (a) Annual Reports for the Fiscal Years Ended March 31, 1964 and 1963.

(b) Data supplied to Department of National Health and Welfare by Provincial Plans.

Table 17 shows separations, patient-days, and average length of stay separations, both by sexes by age-groups for 1961, 1962 and 1963. In the 5-14 age-group, the number of separations per thousand population declined since 1961, and the average length of stay remained almost unchanged. In the 45-plus age-group the trend is uninterrupted.

b) Hospital Morbidity

Of the entire Canadian List of 98 Diagnoses (Table 19 and A20)⁽¹⁾ the three leading diagnoses, delivery without mention of complications, hypertrophy of tonsils and adenoids, and pneumonia, accounted for close to 25 per cent of separations in 1963. The first ten leading diagnoses accounted for 40 per cent of separations.

Although the first ten leading diagnoses were responsible for 40.0 per cent separations in 1963, those separations accounted only for 27.6 per cent of patient-days in that year; this is due in part to short periods of stay in hospital of separations diagnosed as "delivery without mention of complications" which alone accounted for 14.1 per cent of separations but for only 7.1 per cent of patient-days. (Table 19 and A20).

5. Hospital Personnel

Growing population, higher per capita utilization of hospital facilities, continuous improvement in the quality of hospital services, and amelioration of employment conditions in hospitals are the major factors responsible for the steady increase in the number of hospital employees over the last few years. Table 20 shows that in 1963 the number of persons employed full-time in hospitals listed in hospital insurance agreements increased by 5.8 per cent from 196,367 in 1962 to 207,778; during the same year the number of part-time employees increased by 6.0 per cent, rising from 21,738 in 1962 to 23,044 in 1963. The corresponding percentage increase between 1961 and 1962 was 5.5 per cent for full-time and 7.9 per cent for part-time employees. In the provinces, the increase in the number of full-time hospital personnel in 1963 ranged from 11.7 per cent in Newfoundland to 2.6 per cent in British Columbia and 0.7 per cent in Prince Edward Island. The increases in Quebec and Ontario were 7.5 per cent and 5.2 per cent respectively and together these two provinces accounted for 68.6 per cent of the total increase in the number of full-time employees in hospitals listed in hospital insurance agreements.

- (1) Excluded from the table are four specific categories, grouped as Supplementary Classifications for Special Admissions, Live-Births and Stillbirths (95. Medical or Special Examination (without sickness); 96. Mature Liveborn; 97. Immature Newborn; 98. Other Special Admissions, Examinations, etc.)

TABLE 18
HOSPITALIZATION BY AGE AND SEX, FOR ADULTS AND CHILDREN IN-PATIENTS, INSURED BY PROVINCIAL PLANS,
IN TEN PROVINCES AND TWO TERRITORIES, 1963

	0-4(1)	5-14	15-24	25-44	45-64	65-69	70+	Age Unk.	Total
SEPARATIONS									
Male	204,815	179,956	107,564	207,919	250,962	57,962	151,453	36	1,160,667
Female	151,694	155,073	369,772	654,071	265,297	52,832	141,007	31	1,789,777
Total	356,509	335,029	477,336	861,990	516,259	110,794	292,460	67	2,950,444
SEPARATIONS PER 1,000 POPULATION									
Male	175.0	85.6	74.6	84.9	149.4	238.7	338.7	-	121.7
Female	135.7	77.2	261.6	269.1	161.9	207.6	283.3	-	191.2
Total	155.8	81.5	167.2	176.6	155.6	222.8	309.5	-	156.1
PATIENT DAYS SINCE ADMISSION									
Male	1,687,766	1,086,857	890,907	2,179,626	3,920,111	1,225,608	4,037,398	400	15,028,673
Female	1,267,741	908,557	2,337,707	5,081,918	3,976,493	1,120,860	4,823,085	252	19,516,613
Total	2,955,507	1,995,414	3,228,614	7,261,544	7,896,604	2,346,468	8,860,483	652	34,545,286
DAYS SINCE ADMISSION PER 1,000 POPULATION									
Male	1,441.7	517.0	617.9	889.8	2,333.3	5,047.8	9,028.2	-	1,576.3
Female	1,133.7	452.0	1,653.7	2,090.7	2,427.1	4,404.2	9,690.7	-	2,084.8
Total	1,291.2	485.4	1,130.7	1,487.9	2,379.6	4,718.4	9,377.2	-	1,828.2
AVERAGE STAY OF SEPARATIONS									
Male	8.2	6.0	8.3	10.5	15.6	21.1	26.7	11.1	12.9
Female	8.4	5.9	6.3	7.8	15.0	21.2	34.2	8.1	10.9
Total	8.3	6.0	6.8	8.4	15.3	21.2	30.3	9.7	11.7
POPULATION (in Thousands)									
Male	1,170.7	2,102.1	1,441.9	2,449.6	1,680.1	242.8	447.2	-	9,534.4
Female	1,118.2	2,008.5	1,413.6	2,430.7	1,638.4	254.5	497.7	-	9,361.6
Total	2,288.9	4,110.6	2,855.5	4,880.3	3,318.5	497.3	944.9	-	18,896.0

(1) Newborns excluded.

Source: Data supplied to Department of National Health and Welfare by Provincial Plans.

TABLE 19
TEN LEADING CAUSES OF HOSPITAL SEPARATIONS, BY DIAGNOSIS, CANADA, 1961-1963

Canadian List Number	Diagnosis	Number of Separations and Rank					
		1963		1962		1961	
		Separations	Rank	Separations	Rank	Separations	Rank
75	Delivery without mention of complications	413,213	1	385,812	1	338,271	1
50	Hypertrophy of tonsils and adenoids	196,834	2	174,693	2	161,739	2
48	Pneumonia	99,457	3	83,006	3	64,229	4
38	Arteriosclerotic and degenerative heart diseases	93,449	4	82,867	4	69,535	3
73	Complications of pregnancy	79,180	5	70,792	5	59,148	5
61	Diseases of gallbladder and pancreas	69,983	6	55,303	7	46,083	9
56	Hernia of abdominal cavity	61,992	7	56,157	6	47,225	7
74	Abortion	55,696	8	52,812	8	46,377	8
49	Bronchitis	54,819	9	49,384	10	35,661	10
55	Appendicitis	54,086	10	50,382	9	48,224	6

Note: In 1962 the data excluded Newfoundland, Nova Scotia and New Brunswick; and in 1961, the data excluded Newfoundland, New Brunswick, Manitoba and Alberta.

Source: Annual Reports for the Fiscal Year Ended March 31, 1964 and 1963 and Table A20.

TABLE 20

NUMBER OF PERSONS EMPLOYED FULL-TIME AND PART-TIME IN HOSPITALS⁽¹⁾ LISTED IN
HOSPITAL INSURANCE AGREEMENTS, BY PROVINCE, AS AT DECEMBER
31, 1961, 1962, AND 1963.

PROVINCE	Number of Hospitals Reporting			Full-Time			Part-Time		
	1961	1962	1963	1961	1962	1963	1961	1962	1963
Newfoundland	42	43	45	3,004	3,129	3,494	146	104	332
Prince Edward Island	9	9	9	908	931	938	72	47	69
Nova Scotia	48	48	48	7,452	7,531	7,954	516	792	606
New Brunswick	40	39	40	6,715	6,893	7,374	530	389	397
Quebec	243	262	268	51,503	56,169	60,370	4,812	4,911	4,819
Ontario	325	321	318	66,466	70,205	73,835	9,172	10,537	11,134
Manitoba	100	101	103	10,053	10,604	11,096	1,431	1,410	1,653
Saskatchewan	160	160	159	10,310	10,389	10,751	709	734	989
Alberta	122	126	132	13,982	14,635	15,538 ⁽²⁾	954	1,095	1,260
British Columbia	111	111	111	15,298	15,534	15,930	1,753	1,572	1,709
Yukon	3	3	3	139	158	147	36	64	33
Northwest Territories	22	19	25	242	189	343	22	83	43
CANADA	1,225	1,242	1,261	186,072	196,367	207,778	20,153	21,738	23,044

(1) 33 Hospitals not reporting, of which 23 Nursing Homes in Alberta.

(2) Includes 114 technicians employed by 2 Provincial Laboratories of Public Health.

Source: Table A21 and Minister's Annual Report for the fiscal Year Ended March 31, 1964.

In 1963, according to statistics in Table 21, 13.9 per cent of the personnel in the hospitals listed in the hospital insurance agreements were classifiable as trainees and 86.1 per cent were full-time or part-time paid employees. The 13.9 per cent of personnel who were in training comprised: doctors, 1.7 per cent; nurses and nursing assistants, 11.3 per cent; and other professional and technical personnel, 0.9 per cent. The employee category comprised: medical staff, 1.3 per cent; nursing staff, 43.9 per cent; other professional and technical staff, 6.2 per cent; and other personnel, 34.7 per cent.

The total number of hospital personnel employed in hospitals listed in the hospital insurance agreements in 1963, including staff in training, was 1,160.6 per 100,000 population in Canada (Table A23). Provincially, this ratio varied from 760.9 in Newfoundland to 1,255.1 in Manitoba. In New Brunswick, Ontario, Manitoba and Saskatchewan the ratios were above the national average. There is a contrast between the way the provinces rank with respect to their per capita ratios of employees, and their ranking, similarly calculated, concerning trainees. For example, Ontario has the largest number of trained personnel per thousand population; however, as far as the number of trainees per thousand population are concerned, Ontario occupies only eighth place among the provinces. The percentage that trainees are of total personnel varies among provinces from 13.4 in British Columbia and 14.6 in Ontario to 23.0 in Nova Scotia, 23.4 in Newfoundland and 26.4 per cent in Prince Edward Island. Only Ontario, Alberta, and British Columbia had this percentage lower than the national average of 17.1.

Table A22 shows the percentage distribution in provinces and territories of all hospital personnel in hospitals listed in the hospital insurance agreements according to type of occupation in 1963. Doctors accounted for 2.4 per cent of hospital personnel in Newfoundland, 1.9 per cent in Manitoba, 1.8 per cent in Nova Scotia, and 1.7 per cent in New Brunswick. Of all personnel in Saskatchewan, Alberta, and British Columbia, 0.9 per cent were doctors, while in Prince Edward Island only 0.8 per cent were doctors. The percentage that nursing staff were of total number of employees varied from 35.9 in Newfoundland and 38.0 in Prince Edward Island to 46.3 in Ontario and 45.8 in Alberta. In provinces, the lowest percentage of other professional and technical staff to the total number of employees was 4.2 in New Brunswick and the highest was 7.2 in Saskatchewan.

Statistics in Table 22 show that the total number of paid hours of work per patient-day in the budget review general hospitals increased between 1961 and 1963 by 0.52 hours or 4.1 per cent rising from 12.65 hours in 1961 to 13.17 hours in 1963. This increase is traced to the increase in the number of hours worked in the nursing department.

TABLE 21

DISTRIBUTION OF PERSONNEL IN HOSPITALS LISTED IN HOSPITAL INSURANCE AGREEMENTS, BY TYPE OF PERSONNEL,
CANADA, 1963

Category	Full-Time	Part-Time	Total	Percent of Total Personnel
<u>Employees</u>				
A. <u>Medical</u>	1,276	1,801	3,077	1.3
B. <u>Nursing</u>				
Graduate Nurses	41,901	7,737	49,638	21.5
Qualified Nursing Assistants	15,094	1,080	16,174	7.0
Orderlies	8,569	274	8,843	3.8
Other	24,133	2,490	26,623	11.5
TOTAL	89,697	11,581	101,278	43.9
C. <u>Other Professional and Technical</u>				
Hospital Administrators	1,257	159	1,416	0.6
Dietitians	866	102	968	0.4
Medical Record Librarians	814	104	918	0.4
Laboratory Technicians	4,421	339	4,760	2.1
Radiological Technicians	2,144	160	2,304	1.0
Combined Technicians	691	71	762	0.3
Physiotherapists	896	140	1,036	0.4
Occupational Therapists	260	31	291	0.1
Pharmacists	658	182	840	0.4
Psychologists	91	36	127	0.1
Social Workers	676	148	824	0.4
TOTAL	12,774	1,472	14,246	6.2
D. <u>Other Personnel</u>	72,026	8,015	80,041	34.7
TOTAL EMPLOYEES	175,773	22,869	198,642	86.1
<u>Trainees</u>				
A. <u>Medical</u>				
Residents and Senior Interns	2,762	80	2,842	1.2
Junior Interns	1,015	95	1,110	0.5
TOTAL	3,777	175	3,952	1.7
B. <u>Nursing</u>				
Student Nurses	22,916	—	22,916	9.9
Nursing Assistants	3,282	—	3,282	1.4
TOTAL	26,198	—	26,198	11.3
C. <u>Other Professional and Technical</u>				
Medical Record Librarians	54	—	54	*
Laboratory Technicians	964	—	964	0.4
Radiological Technicians	1,012	—	1,012	0.4
TOTAL	2,030	—	2,030	0.9
TOTAL TRAINEES	32,005	175	32,180	13.9
TOTAL PERSONNEL	207,778	23,044	230,822	100.0

* Less than 0.05
Source: Table A21

TABLE 22

**PAID HOURS OF WORK, TOTAL AND PER PATIENT-DAY, in BUDGET REVIEW
GENERAL HOSPITALS, CANADA, 1961, 1962, 1963.**

Year		Total	Nursing Personnel	Other Personnel
Total				
	1961.....	328,165,256	173,553,050	154,612,206
	1962.....	352,796,076	192,910,088	159,885,988
	1963.....	372,316,575	207,648,065	164,668,510
Per Patient-Day				
	1961.....	12.65	6.69	5.96
	1962.....	12.95	7.08	5.87
	1963.....	13.17	7.35	5.83

Source: Table A24 and Minister's Annual Report for the Fiscal Year Ended March 31, 1964.

In other than nursing departments in 1963, there was no significant change in the paid hours of work per patient-day. In 1963 there were 9.9 per cent more paid hours of work done per patient-day in nursing departments than in 1961, that is to say, in 1961 there were 6.69 paid hours of work done per patient-day in the nursing departments while in 1963 the corresponding figure was 7.35 hours. Among provinces the number of paid hours of work per patient-day in budget review general hospitals (Table A24) ranged from 14.3 in Quebec to 11.2 in Saskatchewan and British Columbia. In Nova Scotia, New Brunswick, Quebec, Ontario, and Manitoba the number of paid hours per patient-day in those hospitals was higher than the national average of 13.2 hours.

Because of special conditions under which hospitals operate in the territories no valid comparison could be made between the hospital data for the territories and for the provinces.

APPENDIX TABLES

TABLE A1

TOTAL PATIENT DAYS DURING YEAR, ADULTS AND CHILDREN, IN REPORTING HOSPITALS LISTED IN HOSPITAL INSURANCE AGREEMENTS, NUMBER AND PERCENTAGE DISTRIBUTION, BY RESPONSIBILITY FOR PAYMENT, BY PROVINCE, 1963

PROVINCE	(a) Number of Patient Days by Responsibility for Payment								Number of Hospitals Reporting
	Provincial Plan	Insured Residents Responsibility of Provincial Plan	Uninsured Residents of Province	Non-Residents of Province	Workmen's Compensation Boards	Federal Government	Undistributed Patient Days ⁽³⁾	Total Patient Days	
Newfoundland ⁽¹⁾	588,959	23,904	12	3,674	10,148	10,184	3,954	640,835	46
Prince Edward Island ⁽¹⁾	165,890	516	-6	2,925	2,269	3,946	-	175,540	9
Nova Scotia	1,118,554	810	992	19,562	16,323	83,908	-	1,240,149	48
New Brunswick	1,031,860	29	1,105	40,097	22,060	78,551	-	1,173,702	40
Quebec ⁽⁴⁾	9,247,563	5,332	2,306	101,556	120,933	430,666	176,439	10,084,795	271
Ontario ⁽¹⁾	12,099,892	141,716	173,431	199,515	226,917	534,214	91,777	13,467,462	322
Manitoba ⁽¹⁾	1,750,677	899	1,786	60,388	22,238	130,966	3,193	1,970,147	104
Saskatchewan	1,951,013	64	16,381	34,305	18,338	26,135	-	2,046,236	159
Alberta ⁽¹⁾	3,116,612	9,225	12,215	57,049	55,106	124,761	-	3,374,968	155
British Columbia	2,808,885	44,766	12,383	30,553	80,784	415,144	-	3,392,515	111
Yukon	20,126	850	1,790	1,974	1,059	827	-	26,626	5
Northwest Territories	42,596	77	98	4,196	1,078	26,100	-	74,145	26
CANADA	33,942,627	228,188	222,493	555,794	577,253	1,865,402	275,363	37,667,120	1,296

(1) No information available on distribution of patient days by responsibility for payment.

(2) Includes one nursing station that closed during 1963. One hospital did not report distribution of days by responsibility for payment.

(3) Negative figure for uninsured residents due to year-to-year adjustments.

(4) Two reporting hospitals, including Queen Mary Veterans Hospital, did not report distribution of days by responsibility for payment.

TABLE A1 (Cont'd)

PROVINCE	(b) Percentage Distribution of Patient Days by Responsibility for Payment								Number of Hospitals Reporting
	Provincial Plan	Insured Residents Care Not Responsibility of Provincial Plan	Uninsured Residents of Province	Non-Residents of Province	Workmen's Compensation Boards	Federal Government	Undistributed Patient Days	Total Patient Days	
Newfoundland	91.9	3.7	*	0.6	1.6	1.6	0.6	100.0	46
Prince Edward Island	94.5	0.3	-	1.7	1.3	2.2	-	100.0	9
Nova Scotia	90.2	0.1	0.1	1.6	1.3	6.8	-	100.0	48
New Brunswick	87.9	*	0.1	3.4	1.9	6.7	-	100.0	40
Quebec	91.7	0.1	*	1.0	1.2	4.3	1.7	100.0	271
Ontario	89.8	1.1	1.3	1.5	1.7	4.0	0.7	100.0	323
Manitoba	88.9	*	0.1	3.1	1.1	6.6	0.2	100.0	103
Saskatchewan	95.3	*	0.8	1.7	0.9	1.3	-	100.0	160
Alberta	92.3	0.3	0.4	1.7	1.6	3.7	-	100.0	155
British Columbia	82.8	1.3	0.4	0.9	2.4	12.2	-	100.0	111
Yukon	75.6	3.2	6.7	7.4	4.0	3.1	-	100.0	5
Northwest Territories	57.4	0.1	0.1	5.7	1.5	35.2	-	100.0	25
CANADA	90.1	0.6	0.6	1.5	1.5	5.0	0.7	100.0	1,296

(5) Includes two hospitals that closed during 1963. Several small hospitals and nursing homes did not report distribution of days.

(6) Includes an estimate of 60,437 Provincial Plan days and 120,874 federal days in Deer Lodge Veterans Hospital. One small hospital did not report distribution of days.

(7) Includes 23 nursing homes that reported 320,560 Provincial Plan patient days.

* Less than 0.05

TABLE A2

TOTAL PATIENT DAYS DURING YEAR, ADULTS AND CHILDREN, IN HOSPITALS LISTED IN HOSPITAL INSURANCE AGREEMENTS,
NUMBER AND PERCENTAGE DISTRIBUTION AND TOTAL RATES PER THOUSAND POPULATION, BY STATUS
OF HOSPITAL AND BY PROVINCE, 1963

PROVINCE	Number				Total Per 1,000 Population	Percent			Number of Hospitals Reporting
	Budget Review	Contract	Federal Government	Total		Budget Review	Contract	Federal Government	
Newfoundland	594,347	42,547	3,941	640,835	1,332.3	92.7	6.6	0.6	46
Prince Edward Island	175,540	-	-	175,540	1,640.6	100.0	-	-	9
Nova Scotia	1,109,725	-	130,424	1,240,149	1,640.4	89.5	-	10.5	48
New Brunswick	1,054,019	-	119,683	1,173,702	1,911.6	89.8	-	10.2	40
Quebec	8,570,688	893,817	620,290	10,084,795	1,844.3	85.0	8.9	6.2	271
Ontario	11,656,624	798,791	1,012,047	13,467,462	2,088.6	86.6	5.9	7.5	323
Manitoba	1,723,878	23,526	222,743	1,970,147	2,073.8	87.5	1.2	11.3	103
Saskatchewan	1,998,924	5,012	42,300	2,046,236	2,193.2	97.7	0.2	2.1	160
Alberta	2,781,485	327,415	266,068	3,374,968	2,402.1	82.4	9.7	7.9	155
British Columbia	2,801,082	12,758	578,675	3,392,515	2,001.5	82.6	0.4	17.1	111
Yukon	3,863	-	22,763	26,626	1,775.1	14.5	-	85.5	5
Northwest Territories	9,913	34,911	29,321	74,145	3,089.4	13.4	47.1	39.5	25
CANADA	32,480,088	2,138,777	3,048,255	37,667,120	1,993.4	86.2	5.7	8.1	1,296

TABLE A3

TOTAL PATIENT DAYS DURING YEAR, ADULTS AND CHILDREN, IN BUDGET REVIEW HOSPITALS, NUMBER AND PERCENTAGE DISTRIBUTION BY TYPE OF ACCOMMODATION, BY PROVINCE, 1963

PROVINCE	Number		Percent		Total
	Standard Ward	Preferred Accommodation	Standard Ward	Preferred Accommodation	
Newfoundland	530,312	64,035	89.2	10.8	594,347
Prince Edward Island	136,235	39,305	77.6	22.4	175,540
Nova Scotia	800,500	309,225	72.1	27.9	1,109,725
New Brunswick	684,760	369,259	65.0	35.0	1,054,019
Quebec	5,077,188	3,493,500	59.2	40.8	8,570,688
Ontario	7,003,420	4,653,204	60.1	39.9	11,656,624
Manitoba	1,406,177	317,701	81.6	18.4	1,723,878
Saskatchewan	1,736,798	262,126	86.9	13.1	1,998,924
Alberta	2,327,870	453,615	83.7	16.3	2,781,485
British Columbia	2,222,897	578,185	79.4	20.6	2,801,082
Yukon	3,821	42	98.9	1.1	3,863
Northwest Territories	9,913	-	100.0	-	9,913
CANADA	21,939,891	10,540,197	67.5	32.5	32,480,088

TABLE A4

TOTAL SEPARATIONS, ADULTS AND CHILDREN, IN HOSPITALS LISTED IN HOSPITAL INSURANCE AGREEMENTS, NUMBER AND RATES
PER THOUSAND POPULATION, BY PROVINCE, 1961-1963

PROVINCE	Separations During Year			Separations Per Thousand Population			Number of Hospitals Reporting		
	1961	1962	1963	1961	1962	1963	1961	1962	1963
Newfoundland	50,869	54,629	56,292	111.1	116.2	117.0	42	43	46
Prince Edward Island	16,202	16,934	17,079	154.8	159.8	159.6	9	9	9
Nova Scotia	109,273	110,115	110,889	148.3	147.6	146.7	48	48	48
New Brunswick	104,232	104,571	105,861	174.3	172.3	172.4	40	40	40
Quebec	722,909	745,891	771,052	137.4	139.0	141.0	275	266	271
Ontario	949,027	969,272	1,007,587	152.2	152.8	156.3	326	327	321
Manitoba	165,244	170,407	175,525	179.3	182.3	184.8	100	100	103
Saskatchewan	199,236	195,951	210,958	215.3	210.7	226.1	160	160	160
Alberta	261,244	268,690	273,509	196.1	196.1	194.7	122	126	132
British Columbia	285,744	291,650	300,939	175.4	175.8	177.5	108	109	111
Yukon	3,458	3,671	3,297	236.4	244.7	219.8	3	4	5
Northwest Territories	4,548	5,965	6,775	197.8	248.5	282.3	22	20	25
CANADA	2,871,986	2,937,746	3,039,763	157.5	158.2	160.9	1,255	1,252	1,271

TABLE A 5

AVERAGE LENGTH OF STAY, ADULTS AND CHILDREN, IN HOSPITALS LISTED IN HOSPITAL INSURANCE AGREEMENTS, BY STATUS OF HOSPITAL AND BY PROVINCE, 1963

PROVINCE	Patient Days Since Admission Divided by Separations					Patient Days During Year Divided by Separations				
	(1) All Hospitals	Budget Review General	Budget Review Chronic & Convalescent	Contract	Federal Govern- ment	(1) All Hospitals	Budget Review General	Budget Review Chronic & Convalescent	Contract	Federal Govern- ment
Newfoundland	13.0	13.4	-	9.7	5.4	11.4	11.2	-	17.5	5.4
Prince Edward Island	10.4	9.9	-	-	-	10.3	9.8	-	-	-
Nova Scotia	11.3	10.3	32.1	-	38.3	11.2	10.4	34.8	-	34.0
New Brunswick	11.1	10.1	-	-	34.5	11.1	10.1	-	-	35.5
Quebec	13.3	10.3	190.9	17.4	54.8	13.1	10.3	173.0	18.6	50.2
Ontario	13.5	10.7	186.1	22.8	54.1	13.4	10.8	187.7	22.9	44.3
Manitoba	10.8	8.8	88.6	6.5	19.0	11.3	9.0	102.3	6.4	19.5
Saskatchewan	10.6	9.5	-	5.4	15.3	10.5	9.5	-	5.4	15.8
Alberta	11.1	9.0	380.4	6.6	33.0	11.2	8.9	441.4	7.4	31.6
British Columbia	11.0	9.5	-	4.7	42.4	11.3	9.5	-	4.6	48.0
Yukon	8.2	7.7	-	-	8.3	8.1	7.7	-	-	8.1
Northwest Territories	11.8	8.5	-	12.6	12.3	10.9	8.7	-	11.6	11.2
CANADA	12.4	10.1	180.3	18.0	39.5	12.3	10.1	179.4	18.8	36.7

(1) Includes budget review special hospitals.

TABLE A 6

(1) AVERAGE LENGTH OF STAY, ADULTS AND CHILDREN, IN BUDGET REVIEW GENERAL HOSPITALS, BY BED SIZE OF HOSPITAL AND BY PROVINCE, 1963

PROVINCE	Number of Hospitals Reporting	Bed Size of Hospital (Rated Bed Capacity)									Total
		1-9	10-24	25-49	50-99	100-199	200-299	300-499	500-999	1000-and over	
Newfoundland	20	5.7	-	6.5	15.9	10.3	11.0	-	25.0	-	13.4
Prince Edward Island	8	7.2	8.5	8.0	7.8	10.2	11.4	-	-	-	9.9
Nova Scotia	44	8.1	7.7	8.4	9.7	9.7	11.7	9.8	14.3	-	10.3
New Brunswick	33	6.9	7.1	7.3	8.3	9.8	9.7	13.9	15.4	-	10.1
Quebec	129	6.2	7.6	7.0	8.7	8.5	10.0	10.6	13.0	13.4	10.3
Ontario	189	6.4	7.7	9.0	9.9	9.4	10.3	11.1	11.3	14.0	10.7
Manitoba	74	7.3	6.8	6.0	7.6	9.0	8.3	9.2	11.8	-	8.8
Saskatchewan	149	7.4	7.1	7.9	8.5	10.2	11.8	11.4	13.3	-	9.5
Alberta	105	4.7	7.1	6.7	8.0	8.4	9.5	9.3	10.6	14.9	9.0
British Columbia	86	-	7.5	7.4	7.7	8.9	8.8	10.9	11.4	13.7	9.5
Yukon	2	-	7.7	-	-	-	-	-	-	-	7.7
Northwest Territories	1	-	-	8.5	-	-	-	-	-	-	8.5
CANADA	840	6.8	7.2	7.5	8.8	9.0	10.1	10.8	12.2	14.0	10.1

(1) Patient days since admission divided by separations.

TABLE A 7

NUMBER OF HOSPITALS AND OTHER FACILITIES AND PERCENTAGE DISTRIBUTION OF HOSPITALS LISTED IN HOSPITAL
INSURANCE AGREEMENTS, BY STATUS OF HOSPITAL, BY PROVINCE, DECEMBER 31, 1963

PROVINCE	Number and Percentage Distribution of Hospitals(1)								Number of Other Facilities(2)	Total Number of Facilities
	Number				Percent					
	Budget Review	Contract	Federal Government	Total	Budget Review	Contract	Federal Government	Total		
Newfoundland	39	5	1	45	86.7	11.1	2.2	100.0	1	46
Prince Edward Island	9	—	—	9	100.0	—	—	100.0	2	11
Nova Scotia	47	—	1	48	97.9	—	2.1	100.0	2	50
New Brunswick	38	—	2	40	95.0	—	5.0	100.0	1	41
Quebec	164	95	12	271	60.5	35.1	4.4	100.0	2	273
Ontario	215	92	11	318	67.6	28.9	3.5	100.0	4	322
Manitoba	79	8	17	104	76.0	7.7	16.3	100.0	2	106
Saskatchewan	152	4	3	159	95.6	2.5	1.9	100.0	11	170
Alberta	124	26	5	155	80.0	16.8	3.2	100.0	7	162
British Columbia	91	14	6	111	82.0	12.6	5.4	100.0	1	112
Yukon	2	—	3	5	40.0	—	60.0	100.0	1	6
Northwest Territories	1	8	17	26	3.8	30.8	65.4	100.0	1	27
CANADA	961	252	78	1,291	74.4	19.5	6.1	100.0	35	1,326

(1) Excludes three hospitals located in the U.S.A. near Canadian border and listed in the Agreements with New Brunswick and Manitoba.

(2) Includes: a) Budget review facilities consisting of: two provincial laboratories in Alberta and one in each, Prince Edward Island and Saskatchewan; one Medical Arts Laboratory in Saskatchewan; three Cancer Clinics in Alberta, two clinics in Saskatchewan and one clinic in Manitoba; Dartmouth Medical Centre in Nova Scotia; two physical restoration centres and three Red Cross Nursing Stations in Saskatchewan. b) Eighteen contract facilities consisting of - Red Cross Blood Depots in ten provinces and two territories.

TABLE A8

NUMBER AND PERCENTAGE DISTRIBUTION OF BEDS AND CRIBS SET UP, ON DECEMBER 31, IN HOSPITALS LISTED IN HOSPITAL INSURANCE AGREEMENTS, BY STATUS OF HOSPITAL AND BY PROVINCE, 1963

PROVINCE	Number of Hospitals Reporting	Number				Percent			
		Budget Review	Contract	Federal Government	Total	Budget Review	Contract	Federal Government	Total
Newfoundland	45	2,222	136	45	2,403	92.5	5.7	1.9	100.0
Prince Edward Island	9	629	-	-	629	100.0	-	-	100.0
Nova Scotia	48	4,026	-	443	4,469	90.1	-	9.9	100.0
New Brunswick	40	3,578	-	430	4,008	89.3	-	10.7	100.0
Quebec	271	28,643	2,938	2,242	33,823	84.7	8.7	6.6	100.0
Ontario	318	38,761	2,484	3,720	44,965	86.2	5.5	8.3	100.0
Manitoba	104	5,893	117	941	6,951	84.8	1.7	13.5	100.0
Saskatchewan	159	7,572	30	167	7,769	97.5	0.4	2.1	100.0
Alberta	155	10,084	945	1,005	12,034	83.8	7.9	8.3	100.0
British Columbia	111	9,380	112	1,972	11,464	81.8	1.0	17.2	100.0
Yukon	5	27	-	134	161	16.8	-	83.2	100.0
Northwest Territories	26	44	239	199	482	9.1	49.6	41.3	100.0
CANADA	1,291	110,859	7,001	11,298	129,158	85.8	5.4	8.7	100.0

TABLE A 9

NUMBER AND PERCENTAGE DISTRIBUTION OF BUDGET REVIEW GENERAL HOSPITALS,
GROUPED ACCORDING TO THEIR RATED BED CAPACITY, BY PROVINCE, 1963

PROVINCE	Size of Hospital (Rated Bed Capacity)									Total
	1-9	10-24	25-49	50-99	100-199	200-299	300-499	500-999	1000& Over	
Number of Hospitals										
Newfoundland	11	10	8	4	4	1	—	1	—	39
Prince Edward Island	1	1	2	1	2	1	—	—	—	8
Nova Scotia	5	9	12	7	6	3	1	1	—	44
New Brunswick	1	9	7	6	6	4	1	1	—	35
Quebec	2	6	16	22	47	11	14	10	2	130
Ontario	14	6	35	42	36	21	21	11	3	189
Manitoba	7	36	15	7	3	3	1	2	—	74
Saskatchewan	22	78	27	9	5	2	3	2	—	148
Alberta	3	24	39	26	6	1	3	2	1	105
British Columbia	—	17	28	18	16	2	2	2	1	86
Yukon	—	1	—	—	—	—	—	—	—	1
Northwest Territories	—	—	2	—	—	—	—	—	—	2
CANADA	66	197	191	142	131	49	46	32	7	861
Percent of Hospitals										
Newfoundland	28.2	25.6	20.5	10.3	10.3	2.6	—	2.6	—	100.0
Prince Edward Island	12.5	12.5	25.0	12.5	25.0	12.5	—	—	—	100.0
Nova Scotia	11.4	20.5	27.3	15.9	13.6	6.8	2.3	2.3	—	100.0
New Brunswick	2.9	25.7	20.0	17.1	17.1	11.4	2.9	2.9	—	100.0
Quebec	1.5	4.6	12.3	16.9	36.2	8.5	10.8	7.7	1.5	100.0
Ontario	7.4	3.2	18.5	22.2	19.0	11.1	11.1	5.8	1.6	100.0
Manitoba	9.5	48.6	20.3	9.5	4.0	4.0	1.4	2.7	—	100.0
Saskatchewan	14.9	52.7	18.2	6.1	3.4	1.4	1.9	1.4	—	100.0
Alberta	2.8	22.9	37.1	24.8	5.7	1.0	2.8	1.9	1.0	100.0
British Columbia	—	19.8	32.6	20.9	18.6	2.3	2.3	2.3	1.2	100.0
Yukon	—	100.0	—	—	—	—	—	—	—	100.0
Northwest Territories	—	—	100.0	—	—	—	—	—	—	100.0
CANADA	7.7	22.9	22.2	16.5	15.2	5.7	5.3	3.7	0.8	100.0

TABLE A 10

NUMBER AND PERCENTAGE DISTRIBUTION OF BEDS IN BUDGET REVIEW GENERAL HOSPITALS,
GROUPED ACCORDING TO THEIR RATED BED CAPACITY, BY PROVINCE, 1963

PROVINCE	Size of Hospital (Rated Bed Capacity)									
	1-9	10-24	25-49	50-99	100-199	200-299	300-499	500-999	1000&Over	Total
Number of Beds										
Newfoundland	98	224	344	299	501	212	-	544	-	2,222
Prince Edward Island	12	21	64	50	288	164	-	-	-	599
Nova Scotia	59	175	474	577	894	604	491	568	-	3,842
New Brunswick	14	163	276	467	730	841	450	535	-	3,476
Quebec	15	139	534	1,475	6,422	2,603	4,992	5,599	2,056	23,835
Ontario	183	138	1,464	3,155	5,277	5,036	7,628	7,307	3,523	33,711
Manitoba	74	710	547	520	355	696	409	1,574	-	4,885
Saskatchewan	223	1,401	998	737	793	454	1,020	1,300	-	6,926
Alberta	41	484	1,332	1,795	875	231	1,045	1,740	1,089	8,632
British Columbia	-	379	1,080	1,295	2,257	526	880	1,046	1,594	9,057
Yukon	-	27	-	-	-	-	-	-	-	27
Northwest Territories	-	-	44	-	-	-	-	-	-	44
CANADA	719	3,861	7,157	10,370	18,392	11,367	16,915	20,213	8,262	97,256
Percent of Beds										
Newfoundland	4.4	10.1	15.5	13.5	22.5	9.5	-	24.5	-	100.0
Prince Edward Island	2.0	3.5	10.7	8.3	48.1	27.4	-	-	-	100.0
Nova Scotia	1.5	4.6	12.3	15.0	23.3	15.7	12.8	14.8	-	100.0
New Brunswick	0.4	4.7	7.9	13.4	21.0	24.2	12.9	15.5	-	100.0
Quebec	0.1	0.6	2.2	6.2	26.9	10.9	20.9	23.5	8.6	100.0
Ontario	0.5	0.4	4.3	9.4	15.7	14.9	22.6	21.7	10.5	100.0
Manitoba	1.5	14.5	11.2	10.6	7.4	14.2	8.4	32.2	-	100.0
Saskatchewan	3.2	20.2	14.4	10.6	11.4	6.6	14.8	18.8	-	100.0
Alberta	0.5	5.6	15.4	20.8	10.1	2.7	12.1	20.2	12.6	100.0
British Columbia	-	4.2	11.9	14.3	24.9	5.8	9.7	11.6	17.6	100.0
Yukon	-	100.0	-	-	-	-	-	-	-	100.0
Northwest Territories	-	-	100.0	-	-	-	-	-	-	100.0
CANADA	0.7	4.0	7.4	10.7	18.9	11.7	17.4	20.8	8.4	100.0

TABLE A 11

BUDGET REVIEW HOSPITALS: NUMBER AND PERCENTAGE DISTRIBUTION OF BEDS AND CRIBS SET UP, BY TYPE OF UNIT, BY PROVINCE, 1963

PROVINCE	Acute Treatment					Chronic Convales- cent	Total
	General	Obstetric	Paediatric	Psychi- atric	Total Acute Treatment		
NUMBER							
Newfoundland	1,516	258	405	8	2,187	35	2,222
Prince Edward Island	390	84	103	—	577	52	629
Nova Scotia	2,597	659	627	60	3,943	83	4,026
New Brunswick	2,233	514	649	46	3,442	136	3,578
Quebec	17,202	3,174	3,980	475	24,831	3,812	28,643
Ontario	22,805	4,469	3,973	618	31,865	6,896	38,761
Manitoba	3,739	693	738	135	5,305	588	5,893
Saskatchewan	5,080	907	1,105	127	7,219	353	7,572
Alberta	5,662	1,254	1,364	102	8,382	1,702	10,084
British Columbia	6,525	1,192	1,499	98	9,314	66	9,380
Yukon	16	5	6	—	27	—	27
Northwest Territories	24	6	14	—	44	—	44
CANADA	67,789	13,215	14,463	1,669	97,136	13,723	110,859
PERCENT							
Newfoundland	68.2	11.6	18.2	0.4	98.4	1.6	100.0
Prince Edward Island	62.0	13.4	16.3	—	91.7	8.3	100.0
Nova Scotia	64.5	16.4	15.5	1.5	97.9	2.1	100.0
New Brunswick	62.4	14.4	18.1	1.3	96.2	3.8	100.0
Quebec	60.1	11.1	13.9	1.6	86.7	13.3	100.0
Ontario	58.8	11.5	10.2	1.6	82.2	17.8	100.0
Manitoba	63.4	11.8	12.5	2.3	90.0	10.0	100.0
Saskatchewan	67.1	12.0	14.6	1.7	95.3	4.7	100.0
Alberta	56.1	12.4	13.5	1.0	83.1	16.9	100.0
British Columbia	69.6	12.7	16.0	1.0	99.3	0.7	100.0
Yukon	59.3	18.5	22.2	—	100.0	—	100.0
Northwest Territories	54.6	13.6	31.8	—	100.0	—	100.0
CANADA	61.1	11.9	13.1	1.5	87.6	12.4	100.0

TABLE A 12

CONTRACT AND FEDERAL HOSPITALS: NUMBER OF BEDS AND CRIBS SET UP ON DECEMBER 31,
BY TYPE OF UNIT, BY PROVINCE, 1963

PROVINCE	Number of Hospitals Reporting	Acute Treatment					Chronic Convales- cent	Total
		General	Obstetric	Paediatric	Psychi- atric	Total		
CONTRACT								
Newfoundland	5	41	3	5	—	49	87	136
Prince Edward Island	—	—	—	—	—	—	—	—
Nova Scotia	—	—	—	—	—	—	—	—
New Brunswick	—	—	—	—	—	—	—	—
Quebec	95	1,014	270	92	—	1,376	1,562	2,938
Ontario	93	669	96	68	40	873	1,611	2,484
Manitoba	8	88	11	18	—	117	—	117
Saskatchewan	4	11	15	4	—	30	—	30
Alberta	3	19	10	3	—	32	913	945
British Columbia	14	89	5	17	1	112	—	112
Yukon	—	—	—	—	—	—	—	—
Northwest Territories	8	132	21	69	—	222	17	239
CANADA	230	2,063	431	276	41	2,811	4,190	7,001
FEDERAL GOVERNMENT								
Newfoundland	1	21	16	8	—	45	—	45
Prince Edward Island	—	—	—	—	—	—	—	—
Nova Scotia	1	227	—	—	24	251	192	443
New Brunswick	2	201	—	—	32	233	197	430
Quebec	12	1,162	12	10	544	1,728	514	2,242
Ontario	11	1,909	25	62	849	2,845	875	3,720
Manitoba	17	570	35	55	32	692	249	941
Saskatchewan	3	71	11	44	—	126	41	167
Alberta	5	498	14	106	—	618	387	1,005
British Columbia	6	1,358	3	61	44	1,466	506	1,972
Yukon	3	73	24	35	2	134	—	134
Northwest Territories	17	155	24	20	—	199	—	199
CANADA	78	6,245	164	401	1,527	8,337	2,961	11,298

TABLE A 13

AVERAGE PERCENTAGE OCCUPANCY ⁽¹⁾ HOSPITALS LISTED IN HOSPITAL INSURANCE AGREEMENTS, BY STATUS OF HOSPITAL AND BY PROVINCE, 1963

PROVINCE	Budget Review	Budget Review General	Budget Review Chronic & Convalescent	Contract	Federal Government
Newfoundland	74.6	74.6	—	85.7	24.0
Prince Edward Island	76.5	76.0	—	—	—
Nova Scotia	75.5	75.7	87.9	—	80.7
New Brunswick	80.7	80.9	—	—	76.3
Quebec	82.3	81.3	92.5	83.9	75.8
Ontario	83.1	82.3	89.1	88.1	74.5
Manitoba	80.1	78.4	89.2	56.2	64.9
Saskatchewan	79.5	77.8	—	45.8	69.4
Alberta	76.3	74.1	89.8	58.7	72.5
British Columbia	82.1	82.2	—	31.2	81.5
Yukon	39.2	39.2	—	—	46.5
Northwest Territories	61.7	61.7	—	40.0	41.2
CANADA	81.2	80.3	90.4	82.1	73.9

(1) Patient days as a percentage of 365 times beds set up on December 31.
Adjustments made for hospitals in operation for part of year only. Excludes bassinets and newborn days.

TABLE A 14
BUDGET REVIEW GENERAL HOSPITALS: PERCENTAGE OCCUPANCY⁽¹⁾ BY BED SIZE OF HOSPITAL AND BY PROVINCE, 1963

PROVINCE	Number of Hospitals Reporting	Bed-Size of Hospital (Rated Bed Capacity)								1,000 and Over	Total
		1-9	10-24	25-49	50-99	100-199	200-299	300-499	500-999		
Newfoundland	40	33.8	61.8	63.4	64.4	77.4	91.1	-	90.1	-	74.6
Prince Edward Island	8	67.7	49.7	76.0	55.0	81.6	76.7	-	-	-	76.0
Nova Scotia	44	45.3	65.0	72.9	74.1	73.5	81.1	60.3	97.1	-	75.7
New Brunswick	35	96.6	75.0	74.2	71.8	79.6	84.6	87.1	84.6	-	80.9
Quebec	130	62.5	68.8	70.7	79.4	77.3	74.3	83.4	86.2	89.1	81.3
Ontario	189	52.4	66.5	71.5	77.6	78.8	82.7	83.1	86.6	87.6	82.3
Manitoba	74	62.7	60.4	73.0	75.0	76.4	80.2	87.6	87.6	-	78.4
Saskatchewan	149	52.4	68.4	74.7	79.3	81.2	79.8	90.3	81.2	-	77.8
Alberta	105	42.6	60.6	64.5	69.1	76.8	78.5	87.8	79.5	76.1	74.1
British Columbia	86	-	58.0	68.8	77.9	82.1	86.6	88.1	88.6	91.8	82.2
Yukon	2	-	39.2	-	-	-	-	-	-	-	39.2
Northwest Territories	1	-	-	61.7	-	-	-	-	-	-	61.7
CANADA	863	51.1	64.3	70.1	75.5	78.4	80.8	83.7	86.0	87.3	80.3

⁽¹⁾ Patient days as a percentage of 365 times beds set up on December 31. Adjustments made for hospitals in operation for part of the year only.
 Excludes bassinets and newborn days.

TABLE A 15

BASSINETS, PATIENT DAYS DURING YEAR, SEPARATIONS, AVERAGE LENGTH OF STAY, NEWBORN IN HOSPITALS LISTED IN HOSPITAL INSURANCE AGREEMENTS, BY PROVINCE, 1963*

PROVINCE	Bassinets	Patient-Days During Year	Separations	Average length of Stay
Newfoundland	411	45,778	7,663	6.0
Prince Edward Island	136	19,711	2,922	6.7
Nova Scotia	821	135,617	18,853	7.2
New Brunswick	691	102,402	15,853	6.5
Quebec	4,229	828,639	130,440	6.4
Ontario	5,996	1,060,145	155,916	6.8
Manitoba	1,020	151,328	22,878	6.6
Saskatchewan	1,348	154,991	23,570	6.6
Alberta	1,655	266,514	37,704	7.1
British Columbia	1,591	271,442	37,395	7.3
Yukon	44	3,120	483	6.5
Northwest Territories	78	5,665	808	7.0
CANADA	18,020	3,045,352	454,485	6.7

* Not all the hospitals reported the 3 items. Average length of stay calculated for hospitals reporting patient-days and separations.

TABLE A 16
REVENUE FUND EXPENDITURES OF BUDGET REVIEW HOSPITALS, BY TYPE OF ACCOUNT, BY PROVINCE, 1963

PROVINCE	Number of Hospitals Reporting	Departmental Expense						Other Revenue Fund Expense	Total Revenue Fund Expense	Number of Patient Days During Year
		Salaries and Wages	Medical and Surgical Supplies	Drugs	Raw Food	Other Supplies and Expense Minus Raw Food	Total Departmental Expense			
Newfoundland	40	\$ 7,112,143	\$ 528,422	\$ 877,740	\$ 1,539,094	\$ 3,027,005	\$ 13,084,404	\$ 786,601	\$ 13,871,005	594,347
Prince Edward Island	9	1,944,011	121,433	136,830	282,734	727,557	3,212,565	378,999	3,591,564	175,540
Nova Scotia	47	17,275,670	935,268	1,151,054	2,126,691	6,591,862	28,080,545	2,285,929	30,366,474	1,109,725
New Brunswick	38	16,733,474	947,734	1,161,546	1,846,658	5,253,745	25,943,157	3,055,209	28,998,366	1,054,019
Quebec	165	157,947,339	7,522,880	10,039,498	13,746,685	37,694,132	226,950,534	20,189,936	247,140,470	8,570,688
Ontario	215	212,196,428	10,123,203	12,164,809	16,932,572	53,702,749	305,119,761	20,867,808	325,987,569	11,656,624
Manitoba	79	27,730,700	1,387,456	1,879,713	1,786,799	7,315,419	40,100,087	2,815,643	42,915,730	1,723,878
Saskatchewan	145	29,632,103	1,452,293	1,833,795	2,595,662	7,486,620	43,000,473	3,029,060	46,029,533	1,966,485
Alberta	124	40,360,953	1,995,671	2,294,032	4,445,901	8,894,626	57,991,183	6,761,800	64,752,983	2,781,485
British Columbia	91	49,521,945	2,293,048	2,694,830	3,918,354	11,135,171	69,563,348	4,435,389	73,998,737	2,801,082
Yukon	2	97,972	3,036	10,718	17,195	37,145	166,066	9,019	175,085	3,863
Northwest Territories	1	150,117	9,544	8,883	17,577	67,725	253,846	21,705	275,551	9,913
CANADA	956	560,702,855	27,319,988	34,253,448	49,255,922	141,933,756	813,465,969	64,637,098	878,103,067	32,447,649

TABLE A17

REVENUE FUND EXPENDITURES PER PATIENT DAY⁽¹⁾ OF BUDGET REVIEW HOSPITALS, BY TYPE OF ACCOUNT, BY PROVINCE, 1963

PROVINCE	Departmental Expense						Other Revenue Fund Expense	Total Revenue Fund Expense
	Wages and Salaries	Medical and Surgical Supplies	Drugs	Raw Food	Other Supplies and Expense	Total Departmental Expense		
Newfoundland	11.97	.89	1.48	2.59	5.09	22.01	1.32	23.34
Prince Edward Island	11.07	.69	.78	1.61	4.14	18.30	2.16	20.46
Nova Scotia	15.57	.84	1.04	1.92	5.94	25.30	2.06	27.36
New Brunswick	15.88	.90	1.10	1.75	4.98	24.61	2.90	27.51
Quebec	18.43	.88	1.17	1.60	4.40	26.48	2.36	28.84
Ontario	18.20	.87	1.04	1.45	4.61	26.18	1.79	27.97
Manitoba	16.09	.80	1.09	1.04	4.24	23.26	1.63	24.89
Saskatchewan	15.07	.74	.93	1.32	3.81	21.87	1.54	23.41
Alberta	14.51	.72	.82	1.60	3.20	20.85	2.43	23.28
British Columbia	17.68	.82	.96	1.40	3.98	24.83	1.58	26.42
Yukon	25.36	.79	2.77	4.45	9.62	42.99	2.33	45.32
Northwest Territories	15.14	.96	.90	1.77	6.83	25.61	2.19	27.80
CANADA	17.28	.84	1.06	1.52	4.37	25.07	1.99	27.06

(1) Patient days during year for adults and children.

TABLE A18
REVENUE FUND EXPENDITURES PER CAPITA⁽¹⁾ OF BUDGET REVIEW HOSPITALS, BY TYPE OF ACCOUNT, BY PROVINCE, 1963

PROVINCE	Departmental Expense						Other Revenue Fund Expense	Total Revenue Fund Expense
	Salaries and Wages	Medical and Surgical Supplies	Drugs	Raw Food	Other Supplies and Expense	Total Departmental Expense		
Newfoundland	14.79	1.10	1.82	3.20	6.29	27.20	1.64	28.84
Prince Edward Island	18.17	1.13	1.28	2.64	6.80	30.02	3.54	33.57
Nova Scotia	22.85	1.24	1.52	2.81	8.72	37.14	3.02	40.17
New Brunswick	27.25	1.54	1.89	3.01	8.56	42.25	4.98	47.23
Quebec	28.89	1.38	1.84	2.51	6.89	41.51	3.69	45.20
Ontario	32.91	1.57	1.89	2.63	8.33	47.32	3.24	50.56
Manitoba	29.19	1.46	1.98	1.88	7.70	42.21	2.96	45.17
Saskatchewan	31.76	1.56	1.97	2.78	8.02	46.09	3.25	49.33
Alberta	28.73	1.42	1.63	3.16	6.33	41.27	4.81	46.09
British Columbia	29.22	1.35	1.59	2.31	6.57	41.04	2.62	43.66
Yukon	6.53	.20	.71	1.15	2.48	11.07	.60	11.67
Northwest Territories	6.25	.40	.37	.73	2.82	10.58	.90	11.48
CANADA	29.67	1.45	1.81	2.61	7.51	43.05	3.42	46.47

(1)Based on 1963 intercensal population estimates as at June 1, prepared by Dominion Bureau of Statistics.

TABLE A19

PERCENTAGE DISTRIBUTION OF REVENUE FUND EXPENDITURES OF BUDGET REVIEW HOSPITALS,
BY TYPE OF ACCOUNT, BY PROVINCE, 1963

PROVINCE	Departmental Expense						Other Revenue Fund Expense	Total Revenue Fund Expense
	Salaries and Wages	Medical and Surgical Supplies	Drugs	Raw Food	Other Supplies and Expense	Total Departmental Expense		
Newfoundland	51.3	3.8	6.3	11.1	21.8	94.3	5.7	100.0
Prince Edward Island	54.1	3.4	3.8	7.9	20.3	89.4	10.6	100.0
Nova Scotia	56.9	3.1	3.8	7.0	21.7	92.5	7.5	100.0
New Brunswick	57.7	3.3	4.0	6.4	18.1	89.5	10.5	100.0
Quebec	63.9	3.0	4.1	5.6	15.3	91.8	8.2	100.0
Ontario	65.1	3.1	3.7	5.2	16.5	93.6	6.4	100.0
Manitoba	64.6	3.2	4.4	4.2	17.0	93.4	6.6	100.0
Saskatchewan	64.4	3.2	4.0	5.6	16.3	93.4	6.6	100.0
Alberta	62.3	3.1	3.5	6.9	13.7	89.6	10.4	100.0
British Columbia	66.9	3.1	3.6	5.3	15.0	94.0	6.0	100.0
Yukon	56.0	1.7	6.1	9.8	21.2	94.8	5.2	100.0
Northwest Territories	54.5	3.5	3.2	6.4	24.6	92.1	7.9	100.0
CANADA	63.9	3.1	3.9	5.6	16.2	92.6	7.4	100.0

TABLE A 20

HOSPITALIZATION BY PRIMARY DIAGNOSIS ACCORDING TO THE CANADIAN LIST OF 98 DIAGNOSES, ADULT AND CHILD IN-PATIENTS
INSURED BY PROVINCIAL PLANS, TEN PROVINCES AND TWO TERRITORIES, 1963

Canadian List Number and Diagnosis	I.S.C. No.	Separations		Days of Care For Separations		Average Stay of Separations	Percentage Distribution	
		Total	Per 1000 Population	Total	Per 1000 Population		Separations	Days of Care
ALL CAUSES (1-94)		2,929,599	155.0	34,123,564	1805.9	11.6	100.0	100.0
I. INFECTIVE AND PARASITIC DISEASES								
1. Tuberculosis, all forms	001-019	42,668	2.3	587,888	31.1	13.8	1.5	1.7
2. Poliomyelitis and encephalitis	080-083	3,879	0.2	77,857	4.1	20.1	0.1	0.2
3. Infectious hepatitis	092	2,811	0.1	88,679	4.7	31.5	0.1	0.3
4. Other diseases attributable to viruses	084-091	6,789	0.4	92,974	4.9	13.7	0.2	0.3
	093-096	13,491	0.7	129,328	6.8	9.6	0.5	0.4
5. Other infective bacterial, spirochaetal rickettsial or parasitic diseases	020-064	-	-	-	-	-	-	-
	070-074	15,698	0.8	199,050	10.5	12.7	0.5	0.6
	100-108	-	-	-	-	-	-	-
	110-117	-	-	-	-	-	-	-
	120-138	-	-	-	-	-	-	-
II. NEOPLASMS								
6. Malignant neoplasm of buccal cavity and pharynx	140-148	154,465	8.2	2,902,549	153.6	18.8	5.3	8.5
7. Malignant neoplasm of stomach	151	2,571	0.1	58,600	3.1	22.8	0.1	0.2
8. Malignant neoplasm of large intestine except rectum	153	4,816	0.3	133,858	7.1	27.8	0.2	0.4
9. Malignant neoplasm of rectum	154	6,455	0.3	205,066	10.9	31.8	0.2	0.6
10. Malignant neoplasm of bronchus, trachea, & lung, primary & unspecified as to whether primary or secondary	162-163	3,495	0.2	131,275	6.9	37.6	0.1	0.4
11. Malignant neoplasm of breast	170	6,512	0.3	186,287	9.9	28.6	0.2	0.5
12. Malignant neoplasm of cervix uteri	171	9,804	0.5	268,413	14.2	27.4	0.3	0.8
13. Malignant neoplasm of uterus other than of cervix uteri.	172-174	6,480	0.3	113,366	6.0	17.5	0.2	0.3
14. Malignant neoplasm of ovary, Fallopian tube and broad ligament	175	2,687	0.1	50,564	2.7	18.8	0.1	0.1
		1,867	0.1	48,200	2.6	25.8	0.1	0.1

TABLE A20 (Cont'd)

Canadian List Number and Diagnosis	I.S.C.No.	Separations		Days of Care For Separations		Average Stay of Separations	Percentage Distribution	
		Total	Per 1000 Popula- tion	Total	Per 1000 Popula- tion		Separations	Days of Care
II. NEOPLASMS (Cont'd)								
15. Malignant neoplasm of prostate	177	5,839	0.3	192,374	10.2	32.9	0.2	0.6
16. Malignant neoplasm of kidney, bladder and other urinary organs	180, 181 204	5,882 3,662	0.3 0.2	137,814 72,862	7.3 3.9	23.4 19.9	0.2 0.1	0.4 0.2
17. Leukaemia and aleukaemia								
18. Other malignant neoplasms and neoplasms of lymphatic and haematopoietic tissue	150, 152, 155-161, 164, 165, 176, 178, 179, 190-199	22,620	1.2	602,615	31.9	26.6	0.8	1.8
19. Benign neoplasm of uterus	200-203, 205, 214, 215	24,374	1.3	257,658	13.6	10.6	0.8	0.8
20. Benign neoplasm of ovary	216	9,103	0.5	98,086	5.2	10.8	0.3	0.3
21. Benign neoplasms (excluding uterus and ovary) and neoplasm of unspecified nature	210-213, 217-239	38,298	2.0	345,511	18.3	9.0	1.3	1.0
III. ALLERGIC, ENDOCRINE SYSTEM, METABOLIC AND NUTRITIONAL DISEASES								
22. Asthma	241	81,017	4.3	1,262,292	66.8	15.6	2.8	3.7
23. Other allergic disorders (excluding asthma)	240, 242-245	19,448 6,550	1.0 0.3	208,535 54,899	11.0 2.9	10.7 8.4	0.7 0.2	0.6 0.2
24. Diseases of thyroid gland	250-254	11,549	0.6	130,343	6.9	11.3	0.4	0.4
25. Diabetes mellitus	260	32,886	1.7	704,346	37.3	21.4	1.1	2.1
26. Diseases of other endocrine glands	270-277	2,907	0.2	42,674	2.3	14.7	0.1	0.1
27. Avitaminoses and other metabolic diseases	280-289	7,677	0.4	121,495	6.4	15.8	0.3	0.4
IV. DISEASES OF THE BLOOD AND BLOOD-FORMING ORGANS								
28. Diseases of the blood and blood-forming organs	290-299	15,969	0.8	252,520	13.4	15.8	0.5	0.7
		15,969	0.8	252,520	13.4	15.8	0.5	0.7

TABLE A20 (Cont'd)

86

Canadian List Number and Diagnosis	I.S.C. No.	Separations		Days of Care For Separations		Average Stay of Separations	Percentage Distribution	
		Total	Per 1,000 Population	Total	Per 1,000 Population		Separations	Days of Care
V. MENTAL, PSYCHONEUROTIC, AND PERSONALITY DISORDERS	-	70,359	3.7	1,271,632	67.3	18.1	2.4	3.7
29. Psychoses	300-309	14,670	0.8	426,701	22.6	29.1	0.5	1.2
30. Psychoneurotic disorders	310-318	42,449	2.2	665,619	35.2	15.7	1.4	2.0
31. Disorders of character, behaviour and intelligence	320-326	13,240	0.7	179,312	9.5	13.5	0.5	0.5
VI. DISEASES OF THE NERVOUS SYSTEM AND SENSE ORGANS	-	138,279	7.3	3,722,450	197.0	26.9	4.7	10.9
32. Vascular lesions affecting central nervous system	330-334	32,096	1.7	1,639,119	86.7	51.1	1.1	4.8
33. Inflammatory and other diseases of central nervous system	340-345 350-357	25,962	1.4	1,333,165	70.6	51.4	0.9	3.9
34. Diseases of nerves and peripheral ganglia	360-369	9,810	0.5	127,392	6.7	13.0	0.3	0.4
35. Diseases and conditions of the eye	370-389	37,674	2.0	353,720	18.7	9.4	1.3	1.0
36. Diseases of ear and mastoid process	390-398	32,737	1.7	269,054	14.2	8.2	1.1	0.8
VII. DISEASES OF THE CIRCULATORY SYSTEM	-	224,574	11.9	4,796,796	253.9	21.4	7.7	14.1
37. Rheumatic fever and chronic rheumatic heart disease	400-402 410-416	11,029	0.6	225,353	11.9	20.4	0.4	0.7
38. Arteriosclerotic and degenerative heart diseases	420-422	93,449	4.9	2,340,160	123.8	25.0	3.2	6.9
39. Other diseases of the heart	430-434	22,827	1.2	442,825	23.4	19.4	0.8	1.3
40. Hypertensive heart disease and other hypertensive disease	440-447	22,570	1.2	453,059	24.0	20.1	0.8	1.3
41. Diseases of arteries	450-456	13,701	0.7	664,747	35.2	48.5	0.5	1.9
42. Varicose veins of lower extremities	460	20,020	1.1	244,481	12.9	12.2	0.7	0.7
43. Haemorrhoids	461	19,445	1.0	184,596	9.8	9.5	0.7	0.5
44. Phlebitis and thrombophlebitis	463,464	6,172	0.3	95,997	5.1	15.6	0.2	0.3
45. Other diseases of the circulatory system	462, 465-468	15,361	0.8	145,578	7.7	9.5	0.5	0.4

TABLE A20 (Cont'd)

Canadian List Number and Diagnosis	I.S.C.No.	Separations		Days of Care For Separations		Average Stay of Separations	Percentage Distribution	
		Total	Per 1000 Population	Total	Per 1000 Population		Separations	Days of Care
VIII. DISEASES OF THE RESPIRATORY SYSTEM								
46. Acute upper respiratory infections	470-475	469,898	24.9	3,132,352	165.8	6.7	16.0	9.2
47. Influenza	480-483	48,717	2.6	291,171	15.4	6.0	1.7	0.9
48. Pneumonia	490-493	23,785	1.3	160,643	8.5	6.8	0.8	0.5
49. Bronchitis	500-502	99,457	5.3	1,212,114	64.1	12.2	3.4	3.6
50. Hypertrophy of tonsils and adenoids	510	54,819	2.9	559,286	29.6	10.2	1.9	1.6
51. Other diseases of respiratory system	511-527	196,834	10.4	420,032	22.2	2.1	6.7	1.2
		46,286	2.4	489,106	25.9	10.6	1.6	1.4
IX. DISEASES OF THE DIGESTIVE SYSTEM								
52. Diseases of teeth and supporting structure	530-535	389,285	20.6	4,008,541	212.1	10.3	13.3	11.7
		27,663	1.5	61,905	3.3	2.2	0.9	0.2
53. Ulcer of stomach, duodenum and jejunum	540-542	45,488	2.4	659,484	34.9	14.5	1.6	1.9
54. Gastritis, duodenitis and other disorders and diseases of the stomach and duodenum	543-545	24,748	1.3	199,769	10.6	8.1	0.8	0.6
55. Appendicitis	550-553	54,086	2.9	427,041	22.6	7.9	1.8	1.3
56. Hernia of abdominal cavity	560-561	61,992	3.3	578,941	30.6	9.3	2.1	1.7
57. Intestinal obstruction without mention of hernia	570	9,144	0.5	121,958	6.5	13.3	0.3	0.4
58. Gastro-enteritis and colitis, except ulcerative, age 4 weeks and over	571	49,764	2.6	393,703	20.8	7.9	1.7	1.2
59. Chronic enteritis and ulcerative colitis	572	11,271	0.6	183,741	9.7	16.3	0.4	0.5
60. Cirrhosis and other diseases of liver	580-583	7,226	0.4	141,948	7.5	19.6	0.2	0.4
61. Diseases of gallbladder and pancreas	584-587	63,983	3.4	893,911	47.3	14.0	2.2	2.6
62. Other diseases of digestive system	536-539, 573-579	33,920	1.8	346,140	18.3	10.2	1.2	1.0

TABLE A20 (Cont'd)

Canadian List Number and Diagnosis	L.S.C.No.	Separations		Days of Care For Separations		Average Stay of Separations	Percentage Distribution	
		Total	Per 1000 Population	Total	Per 1000 Population		Separations	Days of Care
X. DISEASES OF THE GENITO-URINARY SYSTEM		233,055	12.3	2,276,675	120.5	9.8	8.0	6.7
	590-594	7,241	0.4	140,775	7.4	19.4	0.2	0.4
	600	20,030	1.1	221,636	11.7	11.1	0.7	0.6
	602-604	17,586	0.9	175,154	9.3	10.0	0.6	0.5
	601-603, 605-609	32,536	1.7	342,482	18.1	10.5	1.1	1.0
	610	18,055	1.0	389,303	20.6	21.6	0.6	1.1
	615	10,119	0.5	35,421	1.9	3.5	0.3	0.1
	622-626	33,558	1.8	254,922	13.5	7.6	1.1	0.7
	630							
	631	18,262	1.0	265,642	14.1	14.5	0.6	0.8
XI. DELIVERIES AND COMPLICATIONS OF PREGNANCY, CHILDBIRTH AND THE PUERPERIUM	634	33,624	1.8	165,969	8.8	4.9	1.1	0.5
	611-614	42,044	2.2	285,371	15.1	6.8	1.4	0.8
	616,617							
	620-621							
	632,633							
	635-637							
	640-649	593,127	31.4	3,388,349	179.3	5.7	20.2	9.9
	650-652	79,180	4.2	355,126	18.8	4.5	2.7	1.0
	660	55,696	2.9	222,007	11.7	4.0	1.9	0.6
		413,213	21.9	2,414,174	127.8	5.8	14.1	7.1
76. Delivery with specified complications	670-678	39,957	2.1	351,955	18.6	8.8	1.4	1.0

TABLE A20 (Cont'd)

Canadian List Number and Diagnosis	I.S.C.No.	Separations		Days of Care For Separations		Average Stay of Separations	Percentage Distribution	
		Total	Per 1000 Population	Total	Per 1000 Population		Separations	Days of Care
XI. DELIVERIES AND COMPLICATIONS OF PREGNANCY, CHILDBIRTH AND THE PUERPERIUM (Cont'd)								
77. Complications of the puerperium	680-689	5,081	0.3	45,087	2.4	8.9	0.2	0.1
XII. DISEASES OF THE SKIN AND CELLULAR TISSUE								
78. Infection of skin and subcutaneous tissue	690-698	60,130	3.2	605,171	32.0	10.1	2.1	1.8
79. Other diseases of skin and subcutaneous tissue	700-716	29,616	1.6	238,264	12.6	8.0	1.0	0.7
		30,514	1.6	366,907	19.4	12.0	1.0	1.1
XIII. DISEASES OF BONES AND ORGANS OF MOVEMENT								
80. Arthritis and rheumatism, except rheumatic fever	720-727	98,378	5.2	1,867,974	98.9	19.0	3.4	5.5
81. Displacement of intervertebral disc	735	38,305	2.0	928,914	49.2	24.2	1.3	2.7
82. Other diseases of bones and organs of movement	730-734 736-738, 740-749	19,435 40,638	1.0 2.2	337,901 601,159	17.9 31.8	17.4 14.8	0.7 1.4	1.0 1.8
XIV. CONGENITAL MALFORMATIONS								
83. Congenital Malformations	750-759	27,042	1.4	422,495	22.4	15.6	0.9	1.2
		27,042	1.4	422,495	22.4	15.6	0.9	1.2
XV. CERTAIN DISEASES OF EARLY INFANCY								
84. Certain diseases of early infancy	760-776	10,593	0.6	136,610	7.2	12.9	0.4	0.4
		10,593	0.6	136,610	7.2	12.9	0.4	0.4

TABLE A20 (Cont'd)

Canadian List Number and Diagnosis	I.S.C. No.	Separations		Days of Care For Separations		Average Stay of Separations	Percentage Distribution	
		Total	Per 1000 Population	Total	Per 1000 Population		Separations	Days of Care
XVI SYMPTOMS,SENILITY, AND ILL-DEFINED CONDITIONS								
85. Symptoms, senility, and ill-defined conditions	780-795	69,123	3.7	598,047	31.6	8.7	2.4	1.8
		69,123	3.7	598,047	31.6	8.7	2.4	1.8
XVII ACCIDENTS, POISONINGS, VIOLENCE (NATURE OF INJURY)								
86. Fracture of or involving skull or face bones, and head injury, except open wounds, contusion and haematoma of scalp	N800-804 N852-856	251,637	13.3	2,891,223	153.0	11.5	8.6	8.5
87. Fracture of spine and trunk	N805-809	13,665	0.7	290,102	15.4	21.2	0.5	0.8
88. Fracture of upper limb	N810-819	32,051	1.7	196,589	10.4	6.1	1.1	0.6
89. Fracture of femur	N820-821	14,410	0.8	726,403	38.4	50.4	0.5	2.1
90. Other fracture of lower limbs (excluding femur)	N822-829	22,932	1.2	364,096	19.3	15.9	0.8	1.1
91. Dislocation without fracture, and sprains and strains of joints and adjacent muscles	N830-848	24,074	1.3	205,490	10.9	8.5	0.8	0.6
92. Internal injury of chest, abdomen and pelvis	N860-869	2,998	0.2	39,787	2.1	13.3	0.1	0.1
93. Burns	N940-949	10,624	0.6	184,731	9.8	17.4	0.4	0.5
94. Other and unspecified effects of accidents, poisonings and violence	N850-851, N870-888, N890-898, N900-908, N910-918, N920-936, N950-999.	94,605	5.0	613,341	32.5	6.5	3.2	1.8

1. Prince Edward Island and British Columbia did not include out of province responsibility of Provincial Plan hospitalization data. Saskatchewan excluded responsibility of Provincial Plan hospitalization data for geriatric hospitals at Regina, Saskatoon, Melfort, and Swift Current.

2. Prince Edward Island, New Brunswick, Quebec, Ontario, Manitoba and Alberta included data for hospitalization not the responsibility of Provincial Plan.

3. Excludes "Y" group supplementary classification for special admissions; livebirths and stillbirths (95-98).

Source: Data supplied to Department of National Health and Welfare by the Provinces.

TABLE A-21
DISTRIBUTION OF FULL-TIME AND PART-TIME ⁽¹⁾ PERSONNEL IN HOSPITALS LISTED IN HOSPITAL INSURANCE AGREEMENTS, BY TYPE OF PERSONNEL, BY PROVINCE, 1963.

Category	Newfoundland	Prince Edward Island	Nova Scotia	New Brunswick	Quebec	Ontario	Manitoba	Saskatchewan	Alberta	British Columbia	N.W.T. & Yukon	Canada
Employees												
A. Medical	28 (62)	4 (4)	52 (106)	37 (96)	418 (548)	454 (608)	65 (180)	52 (54)	56 (89)	98 (54)	2 (—)	1,276 (1,801)
B. Nursing												
Graduate Nurses	596 (88)	210 (26)	2,017 (291)	1,424 (143)	9,857 (1,358)	16,017 (4,216)	1,985 (499)	2,151 (316)	3,377 (399)	4,119 (386)	148 (15)	41,901 (7,737)
Qualified Nursing Assistants	177 (39)	82 (1)	578 (58)	743 (19)	3,557 (113)	5,810 (562)	793 (106)	666 (24)	1,706 (49)	919 (59)	63 (5)	15,094 (1,080)
Orderlies	115 (11)	24 (1)	145 (—)	296 (2)	2,907 (12)	3,012 (110)	476 (1)	326 (3)	519 (9)	746 (16)	3 (—)	8,569 (274)
Other	336 (11)	35 (4)	413 (18)	761 (70)	8,269 (547)	8,303 (1,307)	1,670 (175)	1,360 (147)	1,549 (84)	1,421 (126)	16 (1)	24,133 (2,490)
Total	1,224 (149)	351 (32)	3,153 (367)	3,224 (234)	24,590 (2,184)	33,142 (6,195)	4,924 (781)	4,503 (490)	7,151 (541)	7,205 (587)	230 (21)	89,697 (11,581)
C. Other Professional and Technical												
Hospital Administrators	16 (23)	9 (2)	55 (3)	40 (7)	283 (35)	327 (26)	100 (23)	161 (13)	137 (17)	116 (7)	13 (3)	1,257 (159)
Dietitians	7 (3)	4 (—)	45 (7)	31 (1)	221 (18)	326 (43)	48 (8)	24 (1)	67 (12)	92 (9)	1 (—)	866 (102)
Medical Record Librarians	10 (—)	4 (—)	61 (1)	35 (—)	190 (23)	276 (37)	35 (9)	57 (8)	79 (10)	64 (15)	3 (1)	814 (104)
Laboratory Technicians	79 (8)	12 (1)	153 (5)	43 (1)	1,328 (91)	1,619 (167)	208 (17)	228 (8)	381 (22)	354 (18)	6 (1)	4,421 (339)
Radiological Technicians	48 (4)	9 (3)	142 (5)	86 (4)	629 (57)	752 (60)	78 (8)	112 (—)	127 (7)	158 (13)	3 (3)	2,144 (160)
Combined Technicians	26 (—)	4 (—)	8 (1)	1 (—)	386 (20)	69 (9)	18 (7)	93 (14)	73 (4)	12 (8)	1 (—)	691 (71)
Physiotherapists	12 (2)	11 (3)	23 (8)	25 (3)	194 (19)	375 (76)	47 (4)	29 (6)	78 (11)	102 (6)	— (2)	896 (140)
Occupational Therapists	2 (1)	1 (—)	6 (—)	7 (—)	49 (5)	116 (12)	22 (4)	10 (—)	21 (6)	26 (3)	— (—)	260 (31)
Pharmacists	7 (2)	2 (1)	18 (3)	23 (4)	196 (57)	241 (61)	39 (12)	42 (11)	39 (16)	49 (14)	2 (1)	658 (182)
Psychologists	— (—)	— (—)	2 (1)	2 (—)	47 (17)	26 (12)	5 (2)	3 (2)	3 (—)	3 (2)	— (—)	91 (36)
Social Workers	3 (—)	— (—)	15 (1)	8 (—)	470 (118)	86 (13)	32 (3)	14 (4)	11 (5)	37 (2)	— (—)	676 (148)
Total	210 (43)	56 (10)	528 (31)	301 (22)	3,993 (448)	4,213 (516)	632 (97)	773 (67)	1,016 (110)	1,023 (97)	29 (11)	12,774 (1,472)
D. Other Personnel	1,337 (78)	324 (23)	2,179 (96)	2,624 (44)	20,924 (1,501)	25,930 (3,804)	3,486 (565)	3,665 (378)	4,995 (518)	5,633 (964)	229 (44)	72,026 (8,015)
Total Employees	2,799 (332)	735 (69)	6,412 (600)	6,186 (396)	49,925 (4,701)	63,739 (11,123)	9,307 (1,623)	8,993 (989)	13,228 (1,288)	13,959 (1,702)	490 (76)	175,773 (22,869)
Trainees												
A. Medical												
Residents and Senior Interns	26 (—)	— (—)	73 (—)	72 (1)	1,347 (56)	721 (4)	160 (16)	65 (—)	130 (2)	168 (1)	— (—)	2,762 (80)
Junior Interns	— (—)	1 (—)	46 (6)	11 (—)	433 (62)	308 (7)	61 (14)	45 (—)	42 (—)	68 (6)	— (—)	1,015 (95)
Total	26 (—)	1 (—)	119 (6)	83 (1)	1,780 (118)	1,029 (11)	221 (30)	110 (—)	172 (2)	236 (7)	— (—)	3,777 (175)
B. Nursing												
Student Nurses	541 *	179 *	1,231 *	985 *	6,484 *	7,525 *	1,308 *	1,382 *	1,784 *	1,497 *	— *	22,016 *
Nursing Assistants	96 *	17 *	110 *	81 *	1,665 *	659 *	137 *	77 *	154 *	86 *	— *	3,282 *
Total	637 *	196 *	1,341 *	1,066 *	8,149 *	8,184 *	1,445 *	1,459 *	1,938 *	1,583 *	— *	26,198 *
C. Other Professional and Technical												
Medical Record Librarians	— *	— *	11 *	— *	— *	17 *	4 *	8 *	10 *	4 *	— *	54 *
Laboratory Technicians	8 *	— *	30 *	1 *	86 *	460 *	53 *	127 *	105 *	94 *	— *	964 *
Radiological Technicians	24 *	6 *	41 *	38 *	230 *	406 *	66 *	54 *	85 *	62 *	— *	1,012 *
Total	32 *	6 *	82 *	39 *	316 *	883 *	123 *	189 *	200 *	160 *	— *	2,030 *
Total Trainees	605 (—)	203 (—)	1,542 (—)	1,188 (—)	10,445 (118)	10,096 (11)	1,789 (30)	1,758 (—)	2,310 (2)	1,979 (7)	— (—)	32,005 (175)
Total Personnel*	3,494 (332)	938 (69)	7,954 (603)	7,324 (397)	60,270 (4,819)	73,835 (11,134)	11,096 (1,653)	10,751 (989)	15,538 (1,260)	15,938 (1,709)	490 (76)	207,778 (23,044)

* Includes 114 technicians employed by the 2 Provincial Laboratories of Public Health (Edmonton and Calgary).
(1) Number of part-time personnel is shown in brackets.

TABLE A22

PERCENTAGE DISTRIBUTION OF TOTAL PERSONNEL (1) IN HOSPITALS LISTED IN HOSPITAL INSURANCE AGREEMENTS,
BY TYPE OF PERSONNEL, BY PROVINCE, 1963

CATEGORY	NFLD.	P.E.I.	N.S.	N.B.	QUE.	ONT.	MAN.	SASK.	ALTA.	B.C.	YUKON & N.W.T.	CANADA
<u>Employees</u>												
A. Medical	2.4	0.8	1.8	1.7	1.5	1.2	1.9	0.9	0.9	0.9	0.4	1.3
B. Nursing												
Graduate Nurses	17.9	23.4	27.0	20.2	17.2	23.8	19.5	21.0	22.5	25.5	28.8	21.5
Qualified Nursing Assistants	5.6	8.2	7.4	9.8	5.7	7.5	7.1	5.9	10.4	5.5	12.0	7.0
Orderlies	3.3	2.5	1.7	3.8	4.6	3.7	3.7	2.8	3.1	4.3	0.5	3.8
Other	9.1	3.9	5.0	10.7	13.5	11.3	14.5	12.8	9.7	8.8	3.0	11.5
Total	35.9	38.0	41.1	44.5	41.1	46.3	44.7	42.5	45.8	44.2	44.3	43.9
C. Other Professional and Techni-												
cal Hospital Administrators	1.0	1.1	0.7	0.6	0.5	0.4	1.0	1.5	0.9	0.7	2.8	0.6
Dietitians	0.3	0.4	0.6	0.4	0.4	0.4	0.4	0.2	0.5	0.6	0.2	0.4
Medical Record Librarians	0.3	0.4	0.7	0.4	0.3	0.4	0.3	0.6	0.5	0.4	0.7	0.4
Laboratory Technicians	2.3	1.3	1.8	0.6	2.2	2.1	1.8	2.0	2.4	2.2	1.2	2.1
Radiological Technicians	1.4	1.2	1.7	1.2	1.1	1.0	0.7	1.0	0.8	1.0	1.1	1.0
Combined Technicians	0.7	0.4	0.1	0.01	0.6	0.1	0.2	0.9	0.5	0.1	0.2	0.3
Physiotherapists	0.4	1.4	0.4	0.4	0.3	0.5	0.4	0.3	0.5	0.6	0.4	0.4
Occupational Therapists	0.1	0.1	0.1	0.1	0.1	0.2	0.2	0.1	0.2	0.2	—	0.1
Pharmacists	0.2	0.3	0.2	0.3	0.4	0.4	0.4	0.4	0.3	0.4	0.5	0.4
Psychologists	—	—	*	*	0.1	*	0.1	*	*	*	—	0.1
Social Workers	0.1	—	0.2	0.1	0.9	0.1	0.3	0.2	0.1	0.2	—	0.4
Total	6.6	6.6	6.5	4.2	6.8	5.6	5.7	7.2	6.7	6.3	7.1	6.2
D. Other Personnel	37.0	34.4	32.4	34.3	34.4	35.0	33.3	34.4	32.8	37.4	48.2	34.7
Total Employees	81.8	79.8	81.9	84.7	83.8	88.1	85.7	85.0	86.2	88.7	100.0	86.1
<u>Trainees</u>												
A. Medical												
Residents and Senior Interns	0.7	—	0.8	0.9	2.2	0.9	1.4	0.6	0.8	1.0	—	1.2
Junior Interns	—	0.1	0.6	0.1	0.8	0.4	0.6	0.4	0.3	0.4	—	0.5
Total	0.7	0.1	1.5	1.1	2.9	1.2	2.0	0.9	1.0	1.4	—	1.7
B. Nursing												
Student Nurses	14.1	17.8	14.4	12.7	9.9	8.9	10.3	11.8	10.6	8.5	—	9.9
Nursing Assistants	2.5	1.7	1.3	1.0	2.9	0.8	1.1	0.6	0.9	0.5	—	1.4
Total	16.6	19.5	15.7	13.7	12.8	9.6	11.3	12.4	11.5	9.0	—	11.3
C. Other Professional & Technical												
Medical Record Librarians	—	—	0.1	—	—	*	*	0.1	0.1	*	—	*
Laboratory Technicians	0.2	—	0.4	0.01	0.1	0.5	0.4	1.1	0.6	0.5	—	0.4
Radiological Technicians	0.6	0.6	0.5	0.5	0.4	0.5	0.5	0.4	0.5	0.4	—	0.4
Total	0.8	0.6	1.0	0.5	0.5	1.0	1.0	1.6	1.2	0.9	—	0.9
Total Trainees	18.2	20.2	18.1	15.3	16.2	11.9	14.3	15.0	13.8	11.3	—	13.9
Total Personnel	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0

* Less than 0.05.

(1) Part-time employees counted as full.

Source: Table A21.

TABLE A 23

TOTAL PERSONNEL⁽¹⁾ PER 100,000 POPULATION IN HOSPITALS LISTED IN HOSPITAL INSURANCE AGREEMENTS,
BY TYPE OF PERSONNEL, BY PROVINCE, 1963

CATEGORY	NFLD.	P.E.I.	N.S.	N.B.	QUE.	ONT.	MAN.	SASK.	ALTA.	B.C.	YUKON & N.W.T.	CANADA
Employees												
A. Medical	12.3	5.6	13.9	13.8	12.7	11.8	16.3	8.5	7.9	7.4	5.1	11.5
B. Nursing												
Graduate Nurses	133.0	208.4	286.1	243.6	192.7	281.1	235.3	247.5	254.6	254.4	400.0	242.2
Qualified Nursing Assistants	41.0	77.6	80.3	124.3	66.5	94.5	89.1	72.7	123.2	56.0	169.2	82.7
Orderlies	25.2	23.4	19.2	48.4	54.3	47.6	50.2	35.2	37.3	44.5	7.7	46.1
Other	71.1	34.6	55.8	129.6	156.2	138.9	185.1	153.7	113.2	87.6	43.6	134.3
Total	270.1	343.0	441.4	544.1	469.7	562.0	559.9	508.9	528.2	442.4	617.9	505.3
C. Other Professional & Technical												
Hospital Administrators	5.8	9.3	7.5	7.2	5.5	5.3	11.8	18.0	10.4	7.1	38.5	7.1
Dietitians	1.9	3.7	6.5	5.2	4.2	5.4	5.5	2.7	5.2	5.7	2.6	4.9
Medical Record Librarians	2.1	3.7	8.2	5.7	3.7	4.6	4.2	6.5	6.0	4.2	10.2	4.6
Laboratory Technicians	17.3	12.1	20.6	7.2	25.1	26.4	22.7	24.9	27.9	22.0	17.9	24.3
Radiological Technicians	10.4	10.3	18.9	14.3	12.0	12.1	8.6	12.0	9.3	9.7	12.8	11.8
Combined Technicians	5.4	3.7	1.2	0.2	7.3	1.1	2.3	10.7	5.3	0.9	2.6	3.8
Physiotherapists	2.7	12.1	3.6	4.4	3.9	6.4	5.2	3.4	6.0	6.1	2.6	5.1
Occupational Therapists	0.6	0.9	0.8	1.1	1.0	1.9	2.5	1.1	1.7	1.6	—	1.5
Pharmacists	1.7	2.8	2.6	4.1	4.1	4.2	4.7	5.1	3.3	3.3	7.7	4.0
Psychologists	—	—	0.4	0.3	1.0	0.5	0.6	0.4	0.2	0.2	—	0.6
Social Workers	0.6	—	2.1	1.5	9.7	1.4	3.6	1.7	1.0	2.2	—	4.0
Total	48.2	57.0	72.0	50.8	77.3	69.3	71.7	86.5	76.2	63.2	89.7	71.5
D. Other Personnel	286.1	314.0	360.7	430.9	396.4	431.6	417.8	413.1	374.0	360.8	643.6	402.4
Total Employees	616.4	719.6	887.8	1,039.7	956.0	1,074.8	1,065.2	1,016.9	986.3	873.7	1,353.8	990.7
Trainees												
A. Medical												
Residents and Senior Interns	5.4	—	9.6	11.9	25.1	11.2	17.7	7.0	9.3	10.0	—	14.8
Junior Interns	—	0.9	6.5	1.8	8.5	4.8	7.2	4.8	3.0	4.2	—	5.6
Total	5.4	0.9	16.1	13.7	33.6	16.1	24.8	11.8	12.3	14.2	—	20.5
B. Nursing												
Student Nurses	112.5	167.3	162.8	160.4	118.6	116.7	137.7	148.1	127.0	88.3	—	121.3
Nursing Assistants	20.0	15.9	14.6	13.2	34.1	10.2	14.4	8.2	11.0	5.1	—	17.4
Total	132.4	183.2	177.4	173.6	152.7	126.9	152.1	156.4	137.9	93.4	—	138.6
C. Other Professional & Technical												
Medical Record Librarians	—	—	1.4	—	—	0.3	0.4	0.8	0.7	0.2	—	0.3
Laboratory Technicians	1.7	—	4.0	0.2	1.6	7.1	5.6	13.6	7.5	5.5	—	5.1
Radiological Technicians	5.0	5.6	5.4	6.2	4.2	6.3	6.9	5.8	6.0	3.6	—	5.4
Total	6.7	5.6	10.8	6.4	5.8	13.7	12.9	20.2	14.2	9.4	—	10.7
Total Trainees	144.5	189.7	204.4	193.6	192.1	156.7	191.5	188.4	164.5	117.0	—	169.8
Total Personnel	760.9	909.3	1,092.2	1,233.4	1,148.1	1,231.4	1,255.1	1,205.4	1,150.7	990.7	1,353.8	1,160.6

(1) Two part-time employees counted as one full-time employee. Items may not add to totals due to rounding.

Source: Table A 21

TABLE A24

PAID HOURS OF WORK, TOTAL AND PER PATIENT-DAY, IN BUDGET REVIEW GENERAL HOSPITAL, BY PROVINCE, 1963.

PROVINCE	Number			Hours Per Patient-Day			Patient-Days During Year
	Total	Nursing	Other Personnel	Total	Nursing Personnel	Other Personnel	
Newfoundland	5,281,000	3,012,248	2,268,852	12.11	6.91	5.20	435,981
Prince Edward Island	2,029,900	1,146,526	883,374	12.21	6.90	5.31	166,244
Nova Scotia	14,742,229	8,614,048	6,128,181	13.97	8.16	5.81	1,055,248
New Brunswick	14,085,110	8,293,395	5,791,715	13.72	8.08	5.64	1,026,407
Quebec	100,605,274	53,264,765	47,340,509	14.29	7.56	6.72	7,041,818
Ontario	135,870,826	76,735,948	59,134,878	13.42	7.58	5.84	10,122,342
Manitoba	18,714,504	10,811,423	7,903,081	13.38	7.73	5.65	1,398,714
Saskatchewan	22,128,931	12,200,803	9,928,128	11.24	6.20	5.04	1,968,020
Alberta	28,298,512	16,444,081	11,854,431	12.16	7.07	5.09	2,327,283
British Columbia	30,418,833	17,058,988	13,359,845	11.23	6.30	4.93	2,707,591
Yukon	52,041	23,677	28,364	13.47	6.13	7.34	3,863
Northwest Territories	89,315	42,163	47,152	9.01	4.25	4.76	9,913
CANADA	372,316,575	207,648,065	164,668,510	13.17	7.35	5.83	28,263,424



Annual Report

of the

Minister of National Health and Welfare

on the operation of

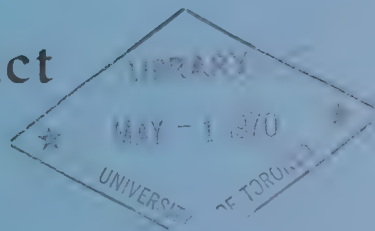
Agreements with the Provinces

under the

Hospital Insurance

and

Diagnostic Services Act



for the fiscal year ended March 31, 1966

ANNUAL REPORT

OF THE

MINISTER OF NATIONAL HEALTH AND WELFARE

ON THE OPERATION OF

AGREEMENTS WITH THE PROVINCES

UNDER THE

HOSPITAL INSURANCE AND DIAGNOSTIC SERVICES ACT

FOR THE FISCAL YEAR ENDED

MARCH 31, 1966

INDEX OF TABLES

	<u>Page</u>
TABLE A - Number of Insured Persons, by Province, on March 31, 1966	11
TABLE B - Net Population of Canada as Estimated by Dominion Statistician, by Province and Percentage Increase over Previous Year, 1958 to 1965.....	13
TABLE C - Summary of Payments made by Canada, by Province, 1965-66 Fiscal Year.....	16
TABLE D - Payments by Canada - in each Fiscal Year, by Province, July 1, 1958 to March 31, 1966	17
TABLE E - Payments by Canada - in respect of each Calendar Year, by Province, July 1, 1958 to March 31, 1966	19
TABLE F - Cost of In-Patient Services, 1963; Net Population, June 1, 1963; Total and 25% Per Capita Cost, 1963, by Province	20
TABLE G - Contribution by Canada with respect to In-Patient Services, 1963	21
TABLE H - Contribution by Canada with respect to Out-Patient Services, 1963	22
TABLE J - Total Contributions and Final Payments made by Canada, by Province, with respect to 1963	23
TABLE K - Cost of In-Patient Services by Province, 1963	24
TABLE L - Per Capita Cost of In-Patient Services, and Percentage Increase over Previous Year, by Province, 1958 to 1963	28
TABLE M - Final Cost of In-Patient Services and Percentage Increase over Previous Year by Province, 1958 to 1963	29

INDEX OF TABLES (Cont'd)

	<u>Page</u>
TABLE 1 - Insured Patient-Days during year, within respective Provinces, Adults and Children, in reporting Hospitals listed in Hospital Insurance Agreements, number and rates per thousand Insured Population, by Province, 1961 - 1964	31
TABLE 2 - Total Patient-Days during year, Adults and Children, in reporting Hospitals listed in Hospital Insurance Agreements, Number and Percentage Distribution and total rate per thousand population, by responsibility for payment, Canada, 1961 - 1964	32
TABLE 3 - Total Patient-Days during year, Adults and Children, in reporting Hospitals, listed in Hospital Insurance Agreements, Number and Percentage Distribution, by status of Hospital and by type of accommodation, Canada, 1961 - 1964	34
TABLE 4 - Total Admissions, Adults and Children, in Hospitals listed in Hospital Insurance Agreements, number and rates per thousand population, by Province, 1961 - 1964	35
TABLE 5 - Average Length of Stay (In Days), Adults and Children, in Hospitals listed in Hospital Insurance Agreements, Canada, 1961 - 1964 ...	37
TABLE 6 - Average Length of Stay (In Days), Adults and Children, in Budget Review General Hospitals, by Province, 1961 - 1964	38
TABLE 7 - Separations and Patient-Days of Separations by Length of Stay Groupings, Number and Percentage Distribution for both Sexes and all Ages, Provincial Plan In-Patients, Canada, 1964	39
TABLE 8 - Number of Hospitals listed in Hospital Insurance Agreements, Number of Hospitals reporting, Beds and Cribs set up on December 31, and rate per 1,000 Population in participating Provinces, Canada, 1959 - 1964	41

INDEX OF TABLES (Cont'd)

		<u>Page</u>
TABLE 9	- Beds and Cribs set up on December 31, total and per thousand Population, Adults and Children, in Hospitals listed in Hospital Insurance Agreements, by Province 1961 - 1964	42
TABLE 10	- Beds and Cribs set up on December 31, Adults and Children, in Hospitals listed in Hospital Insurance Agreements, Number and Percentage Distribution, by status of Hospital and by type of Unit, Canada, 1964	43
TABLE 11	- Average Percentage Occupancy, Hospitals listed in Hospital Insurance Agreements, by status of Hospital, Canada, 1961 - 1964	45
TABLE 12	- Average Percentage Occupancy, Budget Review General Hospitals, by Province, 1961 - 1964	46
TABLE 13	- Bassinets, Patient-Days during Year, Separations and average length of stay of Newborns, in Hospitals listed in Hospital Insurance Agreements, Canada, 1961 - 1964	48
TABLE 14	- Revenue Fund Expenditures of Budget Review Hospitals, by Province, 1959 - 1964	49
TABLE 15	- Revenue Fund Expenditures of all Budget Review Hospitals per Patient-Day, by Province, 1959 - 1964	50
TABLE 16	- Revenue Fund Expenditures of all Budget Review Hospitals per capita, by Province, 1959 - 1964	52
TABLE 17	- Separations per thousand Population, Patient-Days of Separations per thousand Population and Average Stay of Separations, by Age Group, Adults and Children, Canada, 1961 - 1964	54

INDEX OF TABLES (Cont'd)

	<u>Page</u>
TABLE 18 - Hospitalization by Age and Sex, for Adult and Child In-Patients Insured by Provincial Plans, Canada, 1964.....	55
TABLE 19 - Ten Leading Causes of Hospital Separations, by Diagnosis: Number, Rank and Percentage Distribution, Canada, 1961 - 1964.....	57
TABLE 20 - Number of Persons employed full-time and part-time in Hospitals listed in Hospital Insurance Agreements, by Province, as at December 31, 1961, 1962, 1963 and 1964	59
TABLE 21 - Distribution of Personnel in Hospitals listed in Hospital Insurance Agreements, by type of Personnel, Canada, 1964	61
TABLE 22 - Paid Hours of Work, Total and per Patient-Day, in Budget Review General Hospitals, Canada, 1961, 1962, 1963, and 1964.....	63

INDEX OF APPENDIX TABLES

TABLE A1 - Total Patient-Days during year, Adults and Children, in Reporting Hospitals listed in Hospital Insurance Agreements, Number and Percentage Distribution, by responsibility for Payment, by Province, 1964	66
TABLE A2 - Total Patient-Days during year, Adults and Children, in Hospitals listed in Hospital Insurance Agreements, Number and Percentage Distribution and Total Rates per thousand Population, by status of Hospital and by Province, 1964	68
TABLE A3 - Total Patient-Days during year, Adults and Children, in all Budget Review Hospitals, Number and Percentage Distribution by type of Accommodation, by Province, 1964.....	69

INDEX OF APPENDIX TABLES (Cont'd)

	<u>Page</u>
TABLE A4 - Total Separations, Adults and Children in Hospitals listed in Hospital Insurance Agreements, number and rates per thousand Population, by Province, 1961 - 1964	70
TABLE A5 - Average Length of Stay (In Days), Adults and Children, in Hospitals listed in Hospital Insurance Agreements, by status of Hospital and by Province, 1964	71
TABLE A6 - Percentage Distribution of Patient-Days of Separations, by Length of Stay Groupings, both Sexes and all Ages, Provincial Plan In-Patients, by Province, 1964	73
TABLE A7 - Average Length of Stay (In Days), Adults and Children, in Budget Review General Hospitals, by Bed Size of Hospital and by Province, 1964.....	74
TABLE A8 - Number of Hospitals and other Facilities and Percentage Distribution of Hospitals listed in Hospital Insurance Agreements, by status of Hospital, by Province, December 31, 1964	75
TABLE A9 - Number and Percentage Distribution of Beds and Cribs set up, on December 31, in Hospitals listed in Hospital Insurance Agreements, by status of Hospital and by Province, 1964.....	76
TABLE A10 - Number and Percentage Distribution of Budget Review General Hospitals, grouped according to their Rated Bed Capacity by Province, 1964.....	77
TABLE A11 - Number and Percentage Distribution of Beds set up in Budget Review General Hospitals, grouped according to their Rated Bed Capacity by Province, 1964.....	78
TABLE A12 - All Budget Review Hospitals: Number and Percentage Distribution of Beds and Cribs set up, by Type of Unit, by Province, 1964	79

INDEX OF APPENDIX TABLES (Cont'd)

	<u>Page</u>
TABLE A13 - Contract and Federal Hospitals: Number of Beds and Cribs set up on December 31, by Type of Unit, by Province, 1964.....	80
TABLE A14 - Average Percentage Occupancy, Hospitals listed in Hospital Insurance Agreements, by status of Hospital and by Province, 1964	81
TABLE A15 - Budget Review General Hospitals: Average Percentage Occupancy by Bed size of Hospital and by Province, 1964	82
TABLE A16 - Bassinets, Patient-Days during year, Separations and Average Length of Stay of Newborns, in Hospitals listed in Hospital Insurance Agreements, by Province, 1964	83
TABLE A17 - Revenue Fund Expenditures of all Budget Review Hospitals, by Type of Account, by Province, 1964.....	84
TABLE A18 - Revenue Fund Expenditures per Patient-Day of all Budget Review Hospitals, by Type of Account, by Province, 1964	85
TABLE A19 - Revenue Fund Expenditures per Capita of all Budget Review Hospitals, by Type of Account, by Province, 1964	86
TABLE A20 - Percentage Distribution of Revenue Fund Expenditures of all Budget Review Hospitals, by Type of Account, by Province, 1964	87
TABLE A21 - Hospitalization by Primary Diagnosis According to the Canadian List of 98 Diagnoses, Adult and Child In-Patients Insured by Provincial Plans, Ten Provinces and two Territories, 1964	88
TABLE A22 - Distribution of Full-Time and Part-Time Personnel in Hospitals listed in Hospital Insurance Agreements, by Type of Personnel, by Province, 1964	96

INDEX OF APPENDIX TABLES (Cont'd)

	<u>Page</u>
TABLE A23 - Percentage Distribution of Total Personnel in Hospitals listed in Hospital Insurance Agreements, by Type of Personnel, by Province, 1964.....	98
TABLE A24 - Total Personnel per 100,000 Population in Hospitals listed in Hospital Insurance Agreements, by Type of Personnel, by Province, 1964.....	99
TABLE A25 - Paid Hours of Work, Total and Per Patient- Day, in Budget Review General Hospitals, by Province, 1964	100

ANNUAL REPORT
of the
MINISTER OF NATIONAL HEALTH AND WELFARE
on the operation of
Agreements with the Provinces
under the
Hospital Insurance and Diagnostic Services Act
for the fiscal year ended March 31, 1966

This is the eighth report to Parliament required to be made in accordance with Section 9 of the Hospital Insurance and Diagnostic Services Act and it is made with respect to the operation of the Agreements under the Act for the fiscal year ended March 31, 1966.

It should be noted that the data concerning federal contributions, other than the final contribution for 1963, and the number of insured persons as set out in Part I of this report, relate to the fiscal year ended March 31, 1966. The hospital utilization and financial data generally are based on the calendar year and, for this reason, such statistical data concerning the operation of hospitals relate to the calendar year 1964 and are set out in Part II of this report.

Part I of this report also describes the amendments made during the year under review to the federal-provincial Agreements under the Hospital Insurance and Diagnostic Services Act. These amendments have been made in accordance with changes in provincial laws or in provincial administrative arrangements as set out in the Schedules of the Agreements. The activities of the Advisory Committee on Hospital Insurance and Diagnostic Services and the Hospital Services Study Unit are outlined. As in previous years, a description is given of the provisions of provincial programmes as in force at the end of the year under review. Figures are provided concerning the number of persons covered by the hospital insurance programmes at the end of the year under review, and the increases in population since the inception of the programme, are shown. It has also been felt that it would be helpful to include in this report, as in previous reports, an outline of the statutory basis for federal contributions and advance payments made to the provinces. The amounts of payments made to the provinces during the fiscal year under review are shown, and some comparative data are given with regard to final costs since the inception of the programme.

Part II of this report contains statistical data derived from the Annual Return of Hospitals for 1964. As explained in previous reports, the Annual Return of Hospitals was designed for a dual purpose: to fulfil the requirements of the Statistics Act in relation to hospital statistics and administered by the Dominion Bureau of Statistics, and to implement the provincial undertakings embodied in the Agreements under the Hospital Insurance and Diagnostic Services Act and administered by the Department of National Health and Welfare.

PART I - Relating to Fiscal Year 1965-66

1. Changes in Legislation and Agreements

There were a few changes in provincial hospital insurance legislation and in the federal-provincial agreements during the year under review.

New Brunswick amended its legislation to increase insured out-patient services.

In Quebec, insured out-patient services were also extended and the maximum per diem in-patient rate payable to hospitals outside of Canada was increased from \$15.00 to \$25.00 (\$5.00 for newborns).

The Established Programs (Interim Arrangements) Act made provision for provinces to contract out of various federal-provincial programmes, including Hospital Insurance. The Province of Quebec entered into an Agreement with the Federal Government under this Act, effective January 1st, 1965, and as a result the contributions under its hospital insurance programme are made through tax abatement, and not under the Hospital Insurance and Diagnostic Services Act. For this reason Tables in Part I dealing with federal contributions to the provinces in respect of the fiscal year 1965-66 and the calendar year 1965 do not show any contributions to the Province of Quebec.

Ontario added cancer treatment facilities to its list of public hospitals and extended from 19 years to 21 years the age of dependants under its plan.

In Alberta, legislation was amended to provide comprehensive out-patient services upon authorization of the Minister. The approved out-patient services are subject to a 20% co-insurance charge to the patient.

British Columbia amended its legislation so as to extend the period for which residents temporarily absent from the province would continue to be entitled to benefits, and to allow for one month travelling time for

former residents moving from British Columbia. Legislation was also amended to approve certain facilities to provide insured chronic and convalescent care, and to increase the rate of payment for insured in-patient care in hospitals outside Canada to \$25 per day.

The provinces made amendments in their Agreements reflecting these changes in their legislation. In addition most provinces amended their agreements with the federal government to take into account changes in the listing of hospitals and to indicate rates and method of payment to their hospitals for insured out-patient services.

During the year the Hospital Services Study Unit to which reference was made in the last Annual Report, recruited five new members, while active recruitment was maintained to fill the remaining positions.

Members of the Hospital Services Study Unit prepared and presented to the provinces, outlines of areas where applied research would be beneficial, and endeavoured to establish principles which could be incorporated into the planned development of essential health services, with cost being kept constantly in mind. Members of the Study Unit maintained a special interest in the development of computer applications for hospitals.

Members of the Hospital Services Study Unit met with provincial representatives to discuss the potential areas in depth and to assist in the development of applied research projects by the provinces. Interest in the areas of applied research outlined by the Hospital Services Study Unit was evidenced; and it is anticipated that certain projects will develop in the provinces while others will be carried out by the members of the Unit.

The Hospital Services Study Unit is establishing relationships with national organizations and universities to encourage the development of applied research projects in the area of hospitals.

2. Advisory Committee on Hospital Insurance and Diagnostic Services

The Advisory Committee on Hospital Insurance and Diagnostic Services met in Ottawa on November 18 and 19, 1965 and because of the cancellation of the usual spring meeting, dealt with a lengthy agenda.

In addition to the usual exchange of ideas relating to technical and administrative problems and policies in the various provinces and reports of various working parties, the following is a brief summary of the highlights of the meeting:

The members of the Hospital Services Study Unit gave progress reports of their activities since the last Advisory Committee meeting.

Representatives of the Canadian Council on Hospital Accreditation explored with the Committee, ways and means of establishing closer contact with provincial hospital insurance authorities while retaining the voluntary and confidential nature of their programme.

The provinces expressed concern over the rising costs of hospital construction and stressed their need for continued federal grants for hospital construction.

3. Summary of Provincial Programmes

Because of the variation in programmes provided by the provinces in accordance with agreements under the Hospital Insurance and Diagnostic Services Act, it has been the practice to include in this report a summary of provincial programmes as at the end of the fiscal year under review.

(a) In-Patient Services

Since it is a primary requisite for entering into an agreement under the federal Act that a province provide, on uniform terms and conditions, the in-patient services specified in the federal law, all of the provinces provide the following as insured in-patient services:

- (i) accommodation and meals at the standard or public ward level,
- (ii) necessary nursing service,
- (iii) laboratory, radiological and other diagnostic procedures together with the necessary interpretations for the purpose of maintaining health, preventing disease and assisting in the diagnosis and treatment of any injury, illness or disability,
- (iv) drugs, biologicals and related preparations as provided in an agreement,
- (v) use of operating room, case room and anaesthetic facilities, including necessary equipment and supplies,
- (vi) routine surgical supplies,
- (vii) use of radiotherapy facilities where available,
- (viii) use of physiotherapy facilities where available,
- (ix) services rendered by persons who receive remuneration therefor from the hospital, and
- (x) such other services as are specified in an agreement.

(b) Out-Patient Services

While the federal law authorizes the Minister of National Health and Welfare to enter into an agreement to make contributions towards the costs of the above services on an out-patient basis as well, the law is permissive in this regard and the provinces are free to choose which, if any, out-patient services they propose to provide as insured services. At the end of the fiscal year under review, the following was the situation with regard to insured out-patient services:

In the agreement with British Columbia, no out-patient services were listed as insured services at the request of the province. Nevertheless, emergency services and minor surgical procedures are included in the provincial programme on payment of a \$2 charge.

A common feature of out-patient services provided in most of the provinces, is the provision of a fairly broad range of services in the specific event of an accident. In Ontario, these are provided within a period of 24 hours after an accident (Ontario also provides follow-up care in fracture cases), while this period may be extended in Manitoba, Quebec, the Northwest Territories and the Yukon. In Nova Scotia and New Brunswick, emergency services are provided within a period of 48 hours of an accident, and follow-up care is included for a period of 90 days after an accident in New Brunswick.

In addition to these out-patient services provided for emergencies, most provinces now provide an increasing number and widening range of other out-patient services. The Northwest Territories provide certain diagnostic procedures and necessary interpretations.

To the services of the Provincial Cancer Clinics and the Provincial Laboratories provided in previous years, Alberta has now added as out-patient services all services normally provided by a hospital to in-patients, including radiotherapy and physiotherapy where available. All out-patient services are subject to a 20% co-insurance charge payable by the patient.

In Saskatchewan, insured out-patient services include the services provided by a hospital in the course of providing diagnostic or treatment services, to the extent that these can be provided. All radiological and laboratorial procedures and all physiotherapy and occupational procedures are also insured out-patient services to the extent that these can be provided by the participating hospitals.

Manitoba provides surgical procedures, as designated; certain procedures related to medical rehabilitation and electro-shock therapy;

the services provided through and by the Manitoba Cancer Treatment and Research Foundation; and the services provided by the preschool development clinic administered by the Childrens Hospital of Winnipeg.

Ontario provides certain medical and therapeutic procedures in cases where the procedure ordinarily would be carried out as an in-patient service, in specified hospitals. Out-patient services also include the use of radiotherapy for treatment of cancer, and the use of occupational therapy, physiotherapy and speech therapy facilities in specified hospitals.

Quebec provides minor surgical procedures as specified from time to time, including necessary radiological and laboratory examinations which are directly related to these procedures, along with the examination of tissues together with the necessary interpretations. Quebec out-patient services also include psychiatric day care and night care in psychiatric departments of certain specified hospitals. Electro-shock and insulin shock therapy are insured services when provided in psychiatric departments of general hospitals in the province.

In addition, audiology, speech therapy, medical orthoptics, occupational therapy and cytological examinations are now covered under the plan as are prescribed radiotherapy and physiotherapy treatments in recognized hospitals.

In New Brunswick, hospital services and facilities when provided for diagnostic and treatment procedures as authorized from time to time, including the use of the operating room, the use of surgical equipment and supplies, drugs and related preparations and laboratory, radiological and other diagnostic procedures together with the necessary interpretations are all insured out-patient services. Laboratory procedures when referred by a physician are insured services where approved facilities are available. Physiotherapy facilities where available are included as insured out-patient services.

Radiotherapy is provided for proven cases of cancer and electro-shock therapy is an insured service where available. Basal metabolic rate, E. C. G. and E. E. G. with interpretations are also insured under the programme.

Nova Scotia provides a wide range of out-patient services. The services of the tumour clinic and laboratory tests from time to time specified by the Commission, together with necessary interpretations, are insured. The province also includes as insured

out-patient services all medically necessary diagnostic radiological examinations. In addition, treatment facilities where available are insured for radiotherapy and physiotherapy. Minor medical and surgical procedures and the provision of blood including blood fractions, are also insured out-patient services.

Prince Edward Island provides laboratory and radiological procedures as specified, including the use of radioactive isotopes; drugs, biologicals and related preparations for emergency diagnosis and treatment; and all of the other services prescribed as in-patient services in the federal Act.

In Newfoundland, selected diagnostic and treatment procedures are provided as insured out-patient services, including psychiatric day care in two hospitals.

(c) Methods of Provincial Financing

Since the provinces were free to devise their own methods for financing the provincial share of costs, a variety of methods of financing has emerged. Five provinces initially used a premium method, but two of those subsequently switched to general revenue; one province levies a sales (hospital) tax while another levies a property tax. Other provinces finance their share of costs out of general revenue and, in some instances, a combination of methods is used.

The premium method is used in Saskatchewan, Manitoba and Ontario. It had been used in New Brunswick and Prince Edward Island but it was abolished in the former from January 1, 1961 and the latter from December 1, 1962.

The annual premium, or hospitalization tax as it is called, in Saskatchewan was \$17.50 for single persons and \$35.00 for families, but was increased to \$24 and \$48 respectively from January 1, 1961. From January 1, 1964 the premium was lowered to \$20.00 and \$40.00 for single persons and families respectively. The funds derived from the hospitalization tax are augmented by general revenue funds.

The Manitoba monthly premium which was \$2.05 for single persons and \$4.10 for families, was increased to \$3.00 and \$6.00 respectively in June 1960. From January 1962 it was reduced to \$2.00 and \$4.00; at the same time, a 6% charge on personal income tax and an extra 1% tax on taxable income of corporations, were levied to provide for the provincial costs not covered by the premiums.

A compulsory payroll deduction is applied for employed groups of three or more persons. Provision is also made to exempt from this group certain categories of persons for such reasons as temporary or part-time employment.

The Ontario monthly premium had been \$2.10 for single persons and \$4.20 for families for the first few years of the programme; this was increased to \$3.25 and \$6.50 as from October 1, 1964. Insured persons in Ontario are entitled to insured services and, in addition, to services over and above those included in the agreement under the Hospital Insurance and Diagnostic Services Act. The provincial programme in that province includes insured services in mental hospitals and tuberculosis sanatoria. There is a compulsory payroll deduction clause in the Ontario law in relation to establishments of fifteen or more employees including the employer. Unlike the majority of provinces, this category of residents is the only category with respect to whom insurance coverage is compulsory in the province, the programme being available to all others on a voluntary basis.

In all the premium provinces, reduced premium rates are levied with respect to the families of armed services personnel and members of the Royal Canadian Mounted Police.

British Columbia finances the provincial share of costs out of the general revenue of the province (part of a provincial sales tax in British Columbia is paid into the general revenue fund for hospital insurance). A similar method of financing is used in Quebec, New Brunswick, Prince Edward Island, Newfoundland, the Yukon and the Northwest Territories. Both British Columbia and the Northwest Territories supplement this source of revenue by the levy of authorized charges discussed below. Alberta raises a portion of its share of costs from a mill rate levied on property, as well as levying an authorized charge.

When the Hospital Insurance and Diagnostic Services programme came into operation in Nova Scotia, a three per cent hospital tax was also inaugurated and the funds derived from this sales tax are used to finance the provincial share of costs. The tax was increased to five per cent from January 1, 1961.

Only three provinces have included in their Agreement, provisions for levying charges directly to patients for insured services. These deterrent or co-insurance charges, described in the law as authorized charges, are related to in-patient services in British Columbia, where a charge of \$1.00 per day of hospital

care is imposed; in Alberta, where the charge varies between \$1.50 and \$2.00 per day (\$1.00 per day for a newborn), depending upon the category of the hospital; and in the Northwest Territories where a charge of \$1.50 per day of hospital care is imposed. (The charge of \$2.00 referred to above in connection with the out-patient services in British Columbia, is not a part of the joint federal-provincial programme.)

4. Number of Insured Persons

The methods for determining the number of insured persons in a province and outlined in the Agreements, differ since the method used by a province to finance the provincial share of costs has a direct bearing on the availability of an actual count of insured persons. In the three provinces which levy premiums, Ontario, Manitoba and Saskatchewan, insured persons are registered and identification certificates are provided. However, even in these circumstances the methods of registration differ. In Ontario and Manitoba, registration is for single persons and for the family head, but no actual count of the number of dependents of the family head is made. In order therefore, to calculate the average number of persons in the province who are eligible for and entitled to insured services, a number which is required in connection with the federal contribution to the provinces, an estimate of the average number of dependents in these two provinces is made by the Dominion Statistician. In Saskatchewan the registration method used by the province consists of a head count including dependents.

Coverage is automatic or compulsory in all provinces except Ontario where persons employed in an undertaking having a total of 15 or more employed persons are the only mandatory groups, coverage being voluntary for the remaining population.

In provinces where no premiums are levied and where the provincial share of costs is paid out of general revenue, sales or property tax, no individual registration of insured persons is required and coverage is universal. Insofar as these provinces are concerned, provision was made in the Agreements for calculation of the number of insured persons on the basis of a population estimate for a given date in the year (June 1) as determined by the Dominion Statistician.

The Hospital Insurance Regulations define "population" to mean the population of Canada or of the province, as certified by the Dominion Statistician, and, calculated for a calendar year in which a census was taken, as the population of Canada or of the province as ascertained by the census; for other than a census year, the population of Canada or of the province on the 1st day of June in that year according to published original intercensal estimates of the Dominion Statistician.

There are certain categories of persons with respect to whom hospital services are provided under a statute other than the hospital insurance legislation, and who are, therefore, not entitled to insured services. For the most part, these consist of members of the Armed Forces and the Royal Canadian Mounted Police. In addition, inmates of federal penitentiaries are provided with hospital services by the federal government. In the Dominion Bureau of Statistics population estimates, therefore, the number of the members of the regular forces, members of the Royal Canadian Mounted Police and persons serving terms of imprisonment in a federal penitentiary, amounting to some .6% of the total population, are deducted so as to provide a "net" population figure for the purpose of calculating the eligible population.

Table A shows by province, the number of insured persons on March 31, 1966 as reported for purposes of advance payments, the advance estimate of net population as of June 1, 1966 as certified by the Dominion Statistician and the percentage of insured persons to the total net population at the end of the fiscal year under review. It will be noted that in all but three provinces, all of the net population was entitled to insured services at the end of the year.

At the end of the year under review coverage was compulsory or automatic in all provinces with the exception of Ontario, as noted above. Nevertheless, in spite of the partially voluntary aspect of that programme, 98.4% of the net population was insured at the end of the year under review.

The percentage of insured persons in Canada on March 31, 1966 to net population, has increased steadily since the inception of a hospital insurance plan. In the early years of the programme the large increases were due to the increasing number of provinces participating in the joint programme. However, since 1961, the increases represent increases in the number of persons covered in provinces already participating in the plan. The percentages of insured persons to net population at the end of each of the fiscal years since the inception of the programme, are as follows:

March 31, 1959	64.5%
March 31, 1960	67.6%
March 31, 1961	97.7%
March 31, 1962	98.2%
March 31, 1963	98.6%
March 31, 1964	99.1%
March 31, 1965	99.3%
March 31, 1966	99.3%*

* Increase of 1966 over 1965 was less than .1%

TABLE A

NUMBER OF INSURED PERSONS, BY PROVINCE, ON MARCH 31, 1966

PROVINCE	Number of Insured Persons March 31, 1966	Advance Estimate of Net Population June 1, 1966	Percentage of Persons Insured
Newfoundland	504,000	504,000	100
Prince Edward Island	107,000	107,000	100
Nova Scotia	742,000	742,000	100
New Brunswick	620,000	620,000	100
Quebec	5,744,000	5,744,000	100
Ontario	6,763,996	6,873,000	98.4
Manitoba	935,790	952,000	98.3
Saskatchewan	941,956	950,000	99.2
Alberta	1,447,000	1,447,000	100
British Columbia	1,862,000	1,862,000	100
Yukon	15,000	15,000	100
Northwest Territories	25,000	25,000	100
CANADA	19,707,742	19,841,000	99.3

Table B shows, by province, the net population of Canada as estimated by the Dominion Statistician and the percentage increase from year to year, from 1958 to 1965. It will be noted that the net population of Canada increased from 16,918,000 to 19,442,000 during these seven years. The population increase, totalling 2,524,000 persons, represents a 14.9% increase.

On an annual basis, the increase for Canada has averaged approximately 2% and it will be noted that increases have been recorded in most years in individual provinces. The population shown for 1961 is the population based on the census of that year and it was in order to make certain adjustments in individual provinces that decreases were recorded in the net population figures for Newfoundland and New Brunswick. The slight decrease shown for the Yukon in 1962 was due to the rounding of the figure to the nearest thousand persons.

5. Formula For Federal Contributions

The amount of the federal contributions to the provinces is calculated on the basis of a formula contained in the Hospital Insurance and Diagnostic Services Act. It has been designed in such a way as to provide greater federal assistance to those provinces in which the per capita cost of hospital care is lower and to provide for an equitable federal contribution to the provinces, having regard to the considerable variation in the per capita costs between the provinces.

The federal contribution as set out in the Act, is the aggregate in the year of twenty-five per cent of the per capita cost of in-patient services in Canada, that is the national per capita cost, and twenty-five per cent of the per capita cost of in-patient services in the province less the amount of authorized charges, multiplied by the average for the year of the number of insured persons in the province.

The effect of this formula is that the high-cost provinces receive a lower percentage of their costs from the federal government than do the low-cost provinces. The inclusion in the formula of the national per capita cost, however, acts as a deterrent to all provinces, as increases or decreases in provincial in-patient costs change the federal contribution directly by only twenty-five per cent, the remaining twenty-five per cent federal contribution being spread over all provinces through the national per capita.

Since the federal contribution is calculated on an annual basis, provision was made in the Hospital Insurance Regulations for advances on account of contributions, so that the provinces would not be required to wait for reimbursement of the amounts which they are required to

TABLE B

NET POPULATION OF CANADA AS ESTIMATED BY DOMINION STATISTICIAN, BY PROVINCE,
AND PERCENTAGE INCREASE OVER PREVIOUS YEAR, 1958 TO 1965

PROVINCE	1958		1959		1960		*1961		1962		1963		1964		1965	
	Population	%	Population	%	Population	%	Population	%	Population	%	Population	%	Population	%	Population	%
Newfoundland	436,000	2.8	448,000	2.8	457,000	2.0	456,265	-0.2	468,000	2.6	479,000	2.4	490,000	2.3	497,000	1.4
Prince Edward Island	99,000	2.0	101,000	2.0	102,000	1.0	103,531	1.5	105,000	1.4	105,000	-	106,000	1.0	106,000	-
Nova Scotia	691,000	0.7	696,000	0.7	702,000	0.9	716,552	2.1	724,000	1.0	734,000	1.4	739,000	0.7	742,000	0.4
New Brunswick	571,000	2.1	583,000	2.1	593,000	1.7	590,015	-0.5	600,000	1.7	606,000	1.0	609,000	0.5	615,000	1.0
Quebec	4,866,000	2.3	4,980,000	2.3	5,087,000	2.1	5,240,328	3.0	5,346,000	2.0	5,450,000	1.9	5,546,000	1.8	5,640,000	1.7
Ontario	5,759,000	2.6	5,908,000	2.6	6,046,000	2.3	6,192,034	2.4	6,294,000	1.6	6,402,000	1.7	6,540,000	2.2	6,688,000	2.3
Manitoba	859,000	1.7	874,000	1.7	888,000	1.6	911,476	2.6	924,000	1.4	939,000	1.6	947,000	0.9	952,000	0.5
Saskatchewan	885,000	1.6	899,000	1.6	907,000	0.9	921,447	1.6	927,000	0.6	930,000	0.3	939,000	1.0	947,000	0.9
Alberta	1,190,000	3.5	1,232,000	3.5	1,272,000	3.2	1,320,844	3.8	1,358,000	2.8	1,393,000	2.6	1,420,000	1.9	1,440,000	1.4
British Columbia	1,530,000	1.7	1,556,000	1.7	1,594,000	2.4	1,615,707	1.4	1,645,000	1.8	1,681,000	2.2	1,724,000	2.6	1,775,000	3.0
Yukon	12,000	8.3	13,000	8.3	13,000	-	14,161	8.9	14,000	1.1	15,000	7.1	15,000	-	15,000	-
Northwest Territories	20,000	-	20,000	-	21,000	5.0	22,264	6.0	24,000	7.8	24,000	-	25,000	4.2	25,000	-
CANADA	16,918,000	2.3	17,310,000	2.3	17,682,000	2.1	18,104,624	2.4	18,429,000	1.8	18,758,000	1.8	19,100,000	1.8	19,442,000	1.8

*Census Year.

pay to hospitals on a continuing basis. In order to expedite the payment of advances and, at the same time, to forestall the likelihood of major financial adjustments after the end of the year, the formula which is used for the calculation of the advance, provides for a small holdback of the amount due to the province. The formula for the advance, therefore, differs from the formula for the annual contribution in that twenty-three and one-half per cent of the per capita cost of in-patient services in Canada is paid (was twenty-two per cent prior to January 1, 1962 when it was altered in accordance with the amendment to the Hospital Insurance Regulations discussed in previous Reports) instead of twenty-five per cent provided for in the annual calculation, and the amount of the advance unlike the amount of the contribution itself, is calculated on the basis of provincial payments, which may or may not be shareable costs as defined in the law.

Since the amount of the federal payment is calculated on a formula which includes the per capita cost of hospital care in Canada, continuing studies are carried out to ensure that this figure maintains accuracy in an area where costs are subject to fluctuations. Changes in the national per capita cost are made, subject to the approval of Treasury Board, at varying intervals as the situation requires. The purpose of making periodic adjustments in the national per capita is to maintain realistic advance payments and to eliminate major adjustments in the calculations of the federal contribution.

The costs which are shareable by the federal government are described in the federal legislation. The Act specifically excludes from shareable costs amounts expended on the capital cost of land, buildings or physical plant; on the payment of any capital debt or interest related to capital debt; on the payment of debt incurred prior to the coming into force of the agreement or on the interest related to such prior debt; or any provision for depreciation on the value of land, buildings or physical plant. The term "physical plant" is defined in the Regulations as excluding furniture and movable equipment, or nonmovable equipment specially required for use in a hospital. Thus, these items are shareable.

In this connection, it should be noted that most of the capital items which are, by definition, excluded from shareable costs, such as the costs of construction and other matters pertaining to physical plant, are supported by the federal government through the National Health Grants programme and particularly through the Hospital Construction grant.

Generally speaking, shareable costs are the operating costs of the hospital which have been approved by the provincial authority and which have been determined in accordance with recognized and generally accepted accounting principles and procedures. The operating costs of

a hospital as defined in the Regulations, however, specifically exclude some items which, although provided in or in connection with the hospital, are not considered to be an integral part of the operation of the hospital.

The province is required to review and approve as a basis of payment the costs of each hospital, and these approved costs form the basis of the federal sharing formula.

6. Federal Payments

During the year under review, payments to the provinces consisted of the regular monthly advance payments on a current basis and the payment of the final contribution based on shareable costs for the calendar year 1963. For reasons similar to those described in the last Report, the Governor-in-Council authorized a special further advance on account of the contributions for 1963 to the provinces, payable on the submission of acceptable final cost reports. The final payment of the federal contribution for 1963 was completed in March 1966.

Table C is the summary of payments by Canada to participating provinces during the fiscal year under review. It includes advance payments on contributions for the 1965-66 fiscal year, and the final payment on contributions for the 1963 calendar year.

The total payments to the provinces for the year under review were \$337,218,879.76 as advance payments and \$14,547,469.45 as final payments making a total of \$351,766,349.21.

Table D shows the total payments by fiscal year, to participating provinces since the inception of the hospital insurance programme on July 1, 1958, totalling over two billion dollars. It should be recalled that in 1958-59, only five provinces (Newfoundland, Manitoba, Saskatchewan, Alberta and British Columbia) participated at the beginning of the programme, while two additional provinces (Nova Scotia and Ontario) operated programmes for three months only. These seven provinces were joined during the fiscal year 1959-60, by two other provinces which operated programmes for only part of that fiscal year (New Brunswick from July 1 and Prince Edward Island from October 1). During the fiscal year 1960-61 the remaining provinces commenced to participate in the programme (Northwest Territories, April 1, 1960; Yukon, July 1, 1960; and Quebec, January 1, 1961). The fiscal year 1961-62 was the first year during which all of the provinces were participating for the full fiscal year.

Factors which must be considered in connection with the payments shown in this Table are the increase in the number of hospital beds which are being made available to meet the needs of an increasing population; and increasing hospital costs due to readjustments in salaries and wages which form a substantial percentage of overall hospital expenditures.

TABLE C
SUMMARY OF PAYMENTS MADE BY CANADA, BY PROVINCE,
1965-66 FISCAL YEAR

PROVINCE	ADVANCED PAYMENTS			FINAL PAYMENTS*	TOTAL PAYMENTS
	IN-PATIENT	OUT-PATIENT	TOTAL		
Newfoundland	\$ 10,682,267.43	\$ 519,443.68	\$ 11,201,711.11	\$ 447,946.67	\$ 11,649,657.78
Prince Edward Island	2,061,340.71	290,378.79	2,351,719.50	84,357.18	2,436,076.68
Nova Scotia	16,364,048.70	1,220,964.01	17,585,012.71	493,025.87	18,078,038.58
New Brunswick	14,076,219.61	376,831.29	14,453,050.90	466,389.41	14,919,440.31
Quebec	-	-	-	5,299,733.76	5,299,733.76
Ontario	164,035,856.97	3,645,460.97	167,681,317.94	4,217,933.33	171,899,251.27
Manitoba	21,891,058.06	819,910.31	22,710,968.37	420,516.61	23,131,484.98
Saskatchewan	23,398,972.40	1,715,828.76	25,114,801.16	753,844.39	25,868,645.55
Alberta	33,586,631.31	1,628,944.48	35,215,575.79	1,644,369.17	36,859,944.96
British Columbia	39,853,737.78	-	39,853,737.78	691,791.56	40,545,529.34
Yukon	337,536.00	3,127.05	340,663.05	16,134.51	356,797.56
Northwest Territories	692,554.87	17,766.58	710,321.45	11,426.99	721,748.44
CANADA	\$ 326,980,223.84	\$ 10,238,655.92	\$ 337,218,879.76	\$ 14,547,469.45	\$ 351,766,349.21

* Final payments for the 1963 calendar year

TABLE D
PAYMENTS BY CANADA - IN EACH FISCAL YEAR, BY PROVINCE
JULY 1, 1958 to MARCH 31, 1966

PROVINCE	1958-59	1959-60	1960-61	1961-62	1962-63	1963-64	1964-65	1965-66	TOTAL
Newfoundland	\$ 2,857,886.84	\$ 4,707,692.94	\$ 5,094,934.21	\$ 6,258,287.26	\$ 7,472,463.28	\$ 8,724,909.88	\$ 9,623,951.21	\$ 11,649,657.78	\$ 56,389,783.40
Prince Edward Island	-	447,338.27	1,010,806.54	1,381,894.39	1,673,681.11	1,922,524.26	2,102,585.78	2,436,076.68	10,974,907.03
Nova Scotia	1,572,782.64	8,162,540.78	9,595,387.52	11,872,932.01	13,519,974.70	15,174,842.90	15,902,172.05	18,078,038.58	93,878,671.18
New Brunswick	-	4,575,374.90	7,914,412.71	9,546,774.26	10,894,711.87	12,611,337.91	13,750,895.84	14,919,440.31	74,212,947.80
Quebec (1)	-	-	13,936,740.72	73,022,517.78	88,713,635.41	113,848,887.58	95,998,751.05	5,299,733.76	390,820,266.30
Ontario (2)	13,140,213.12	71,892,833.66	84,484,271.86	104,498,880.55	122,103,382.61	136,039,776.87	151,677,498.15	171,899,251.27	855,736,108.09
Manitoba	7,148,834.97	11,324,466.35	13,048,916.19	15,245,924.23	17,348,934.08	19,664,963.78	20,947,876.73	23,131,484.98	127,861,101.31
Saskatchewan	8,430,441.93	13,378,379.43	14,453,463.99	15,953,810.19	18,278,458.50	21,312,084.05	23,526,106.20	25,868,645.55	141,201,389.84
Alberta	8,774,575.68	15,698,727.86	16,905,597.57	19,730,547.07	25,784,973.30	28,310,623.43	31,447,963.95	36,859,944.96	183,512,953.82
British Columbia	12,784,038.88	20,406,091.56	22,493,438.52	25,697,550.94	30,049,147.43	33,687,396.64	36,057,502.19	40,545,529.34	221,720,595.50
Yukon	-	-	168,683.75	296,036.35	310,267.36	349,443.34	307,577.82	356,797.56	1,788,806.18
Northwest Territories	-	-	261,849.89	377,941.52	523,148.02	597,444.71	579,608.16	721,748.44	3,061,740.74
CANADA	\$54,708,474.06	\$150,593,445.75	\$189,368,503.47	\$283,883,096.55	\$336,672,777.67	\$392,244,235.35	\$401,922,489.13	\$351,766,349.21	\$2,161,159,371.19

(1) Excluding an amount of \$3,159,930.88 paid to Quebec for January, February and March, 1965, which has been recovered upon the signing of the supplementary agreement under the Established Programs (Interim Arrangements) Act. The amount paid in 1965-66 is the final payment with respect to the calendar year 1963.

(2) Payment on account of refund (\$200,000.00) received from Ontario in August, 1964, and applicable to calendar years 1959, 1960 and 1961 is not taken into account in this table.

Table E shows the total contributions by province, by calendar year instead of by fiscal year as was shown in Table D. As explained earlier, hospital insurance contributions are calculated on the basis of the calendar year. It will be noted that the amounts shown for 1958, 1959, 1960, 1961, 1962 and 1963 represent both advance payments and final payments. The amounts shown for 1964 and 1965 represent advance payments only and the amounts shown for 1966 represent advance payments for the first three months of that calendar year ended March 31, 1966.

7. Final Contribution for 1963

The final contributions payable for 1963 and paid during the fiscal year under review were calculated on the basis of the formula set out in the Hospital Insurance and Diagnostic Services Act and described above. The per capita cost of in-patient services in 1963 is shown in Table F. It will be noted that the national per capita cost was \$39.44 and that in five provinces the cost exceeded this national figure. As a result, in these provinces the federal contribution represented a percentage of less than 50%, whereas the provinces in which the per capita cost was less than the national, received contributions exceeding 50% of their costs.

Table G shows the total contribution for in-patient services in 1963 as calculated in the formula described above. The total contribution of over \$364 million was made to the provinces, all being participating provinces.

Table H shows the amount of the federal contribution made for out-patient services in 1963. In this connection, it should be recalled that the scope of out-patient services varies very considerably from province to province. During the year, Alberta and Quebec introduced out-patient programmes which accounted for 54% of the 69% increase in the cost of out-patient services in Canada over the year 1962. The federal contribution towards the cost of out-patient services in a province is in the same proportion as the federal contribution for in-patient services in that province.

Table J shows the total contribution payable by Canada to participating provinces with respect to 1963, totalling more than 372 million dollars. It will be recalled, however, that advances had been made to the provinces in an amount exceeding 357 million dollars so that the final payments for 1962 total about fourteen million dollars.

Table K sets out the details of the cost of in-patient services in 1963 in each of the provinces. It will be noted that the provincial costs shown on the last line of this table are the final in-patient costs reported in Table F. This table shows the amount included or deducted in computing the in-patient costs.

TABLE E
PAYMENTS BY CANADA - IN RESPECT OF EACH CALENDAR YEAR, BY PROVINCE
JULY 1, 1958 TO MARCH 31, 1966

PROVINCE	Payments by Canada						Advances on Contributions			
	Total Contributions						1964	1965	1966	
	1958	1959	1960	1961	1962	1963	1964	1965	1966	
Newfoundland	\$ 1,090,135.23	4,788,013.82	\$ 5,603,586.29	\$ 6,185,656.98	\$ 7,043,349.59	\$ 8,052,704.58	\$ 9,163,254.76	\$ 11,095,410.75	\$ 2,467,671.40	
Prince Edward Island	-	235,524.49	1,146,084.16	1,312,097.61	1,509,060.68	1,888,459.30	2,038,278.01	2,270,719.80	574,682.98	
Nova Scotia	-	8,149,539.76	9,991,458.82	11,569,797.35	12,867,987.74	14,287,102.03	15,461,094.13	17,183,104.26	4,368,587.09	
New Brunswick	-	3,331,614.19	7,409,672.94	9,720,034.19	10,987,945.69	12,028,950.31	12,962,173.28	14,089,621.44	3,682,935.76	
Quebec (1)	-	-	-	77,241,386.65	90,370,182.25	106,052,520.98	117,156,176.42	-	-	
Ontario (2)	-	72,610,303.71	86,732,452.12	100,109,894.16	115,504,531.93	131,064,586.37	144,514,104.74	162,195,115.76	43,005,119.30	
Manitoba	4,779,865.66	11,556,009.75	13,229,363.97	15,053,607.08	16,693,750.81	18,631,071.02	20,022,406.77	22,132,041.79	5,762,984.46	
Saskatchewan	5,775,875.67	13,276,380.46	14,893,775.21	16,055,698.34	17,678,472.09	20,412,926.34	22,178,651.60	24,509,532.70	6,420,077.43	
Alberta	6,494,722.50	15,345,668.80	18,200,793.60	20,758,780.56	23,400,819.80	26,992,351.64	29,634,969.14	33,435,730.65	9,159,117.13	
British Columbia	8,609,463.00	20,033,811.20	23,309,699.60	26,075,248.99	28,755,093.50	31,837,299.50	34,023,998.12	38,935,761.63	10,140,319.96	
Yukon	-	-	124,314.31	288,978.79	321,057.29	310,920.14	329,293.34	321,772.15	92,470.16	
Northwest Territories	-	-	288,049.96	391,527.84	481,149.26	564,340.32	562,629.45	674,619.78	179,424.13	
CANADA	\$27,650,062.06	\$149,326,866.18	\$ 180,849,250.98	\$284,762,708.54	\$325,703,400.63	\$372,123,232.53	\$408,047,029.76	\$326,843,430.71	\$85,853,389.80	
CUMULATIVE TOTAL	\$27,650,062.06	\$176,976,928.24	\$ 357,826,179.22	\$642,588,887.76	\$968,292,288.39	\$1,340,415,520.92	\$1,748,462,550.68	\$2,075,305,981.39	\$2,161,159,371.19	

(1) Excluding amounts amounting to \$32,159,930.88 made to Quebec for January, February and March, 1965 which have been recovered upon the signing of the supplementary agreement under the Established Programs (Interim Arrangements) Act.

(2) Payment on account of refund (\$200,000.00) received from Ontario in August, 1961, and applicable to calendar years 1959, 1960 and 1961 is not taken into account in the table.

TABLE F

COST OF IN-PATIENT SERVICES 1963; NET POPULATION, JUNE 1, 1963;
TOTAL AND 25% PER CAPITA COST, 1963, BY PROVINCE

PROVINCE	Cost Of In-Patient Services 1963	Net Population June 1 1963	Per Capita Cost	
			Total 1963	25%
Newfoundland	\$ 11,593,679.79	479,000	\$ 24.2039	\$ 6.0510
Prince Edward Island	2,794,633.27	105,000	26.6156	6.6539
Nova Scotia	24,543,125.50	734,000	33.4375	8.3594
New Brunswick	23,307,248.04	606,000	38.4608	9.6152
Quebec	203,980,113.08	5,450,000	37.4275	9.3569
Ontario	273,300,237.00	6,402,000	42.6898	10.6725
Manitoba	36,358,862.00	939,000	38.7208	9.6802
Saskatchewan	40,947,025.53	930,000	44.0291	11.0073
Alberta	57,204,320.90	1,393,000	41.0656	10.2664
British Columbia	63,853,835.38	1,681,000	37.9856	9.4964
Yukon	645,443.58	15,000	43.0296	10.7574
Northwest Territories	1,343,661.22	24,000	55.9859	13.9965
CANADA	\$ 739,872,185.29	18,758,000	\$ 39.4430	\$ 9.8608

TABLE H

CONTRIBUTION BY CANADA WITH RESPECT TO OUT-PATIENT SERVICES, 1963

PROVINCE	In-Patient Contribution	In-Patient Cost Less Authorized Charges	Out-Patient Cost	Out-Patient Contribution
Newfoundland	\$ 7,621,752.20	\$ 11,593,679.79	\$ 655,534.82	\$ 430,952.38
Prince Edward Island	1,734,043.50	2,794,633.27	248,860.85	154,415.80
Nova Scotia	13,373,626.80	24,543,125.50	1,676,399.20	913,475.23
New Brunswick	11,802,456.00	23,307,248.04	447,276.31	226,494.31
Quebec	104,736,465.00	203,980,113.08	2,563,092.50	1,316,055.98
Ontario	128,706,789.99	273,300,237.00	5,006,622.49	2,357,796.38
Manitoba	18,198,279.27	36,358,862.00	864,687.00	432,791.75
Saskatchewan	19,061,026.88	40,947,025.53	2,904,159.47	1,351,899.46
Alberta	26,593,484.40	51,429,751.80	771,378.53	398,867.24
Yukon	309,273.00	645,443.58	3,437.53	1,647.14
Northwest Territories	554,548.80	1,271,554.72	22,451.50	9,791.52
			\$ 15,163,900.20	\$ 7,594,187.19

TABLE J

TOTAL CONTRIBUTIONS AND FINAL PAYMENTS MADE BY CANADA
BY PROVINCE WITH RESPECT TO 1963

PROVINCE	Contribution by Canada			Less: Regular Advances	Final Payments *
	In-Patient	Out-Patient	Total		
Newfoundland	\$ 7,621,752.00	\$ 430,952.38	\$ 8,052,704.58	\$ 7,604,757.91	\$ 447,946.67
Prince Edward Island	1,734,043.50	154,415.80	1,888,459.30	1,804,102.12	84,357.18
Nova Scotia	13,373,626.80	913,475.23	14,287,102.03	13,794,076.16	493,025.87
New Brunswick	11,802,456.00	226,494.31	12,028,950.31	11,562,560.90	466,389.41
Quebec	104,736,465.00	1,316,055.98	106,052,520.98	100,752,787.22	5,299,733.76
Ontario	128,706,789.99	2,357,796.38	131,064,586.37	126,846,653.04	4,217,933.33
Manitoba	18,198,279.27	432,791.75	18,631,071.02	18,210,554.41	420,516.61
Saskatchewan	19,061,026.88	1,351,899.46	20,412,926.34	19,659,081.95	753,844.39
Alberta	26,593,484.40	398,867.24	26,992,351.64	25,347,982.47	1,644,369.17
British Columbia	31,837,299.50	—	31,837,299.50	31,145,507.94	691,791.56
Yukon	309,273.00	1,647.14	310,920.14	294,785.63	16,134.51
Northwest Territories	554,548.80	9,791.52	564,340.32	552,913.33	11,426.99
CANADA	\$ 364,529,045.34	\$ 7,594,187.19	\$ 372,123,232.53	\$ 357,575,763.08	\$14,547,469.45

* Including special advances

TABLE K
COST OF IN-PATIENT SERVICES, BY PROVINCE, 1963

	Newfoundland	Prince Edward Island	Nova Scotia	New Brunswick	Quebec	Ontario
1. Hospitals listed in Part I of Schedule "A":						
Operating Expenses	\$13,661,114.59	\$3,758,295.84	\$30,561,702.60	\$28,998,704.19	\$249,117,151.01	\$326,062,823.00
Less:						
Ancillary Operations	35,291.51	-	-	-	-	144,935.00
Interest on loans	64,391.31	110,328.42	726,656.46	1,333,081.92	7,949,296.33	2,953,286.00
Depreciation	669,657.66	177,698.90	926,230.70	1,683,969.30	5,434,001.53	10,064,279.00
Direct Cost: Research Projects	113,052.27	-	6,157.29	-	1,184,539.41	2,071,981.00
Ambulance Service	9,125.37	-	30,373.02	53,483.73	260,376.53	34,976.00
O.P.D.	102,903.80	-	103,746.39	-	2,023,497.46	1,792,043.00
Unapproved Expenses	78,140.47	45,540.90	453,723.68	175,535.90	2,083,266.88	1,725,247.00
Offset Income:						
Federal Government	84,444.15	57,906.00	119,146.20	56,771.91	105,598.17	437,780.00
Workmen's Compensation	171,243.70	34,292.00	346,669.50	390,327.50	2,336,247.54	5,317,469.00
Non-Residents	59,853.30	44,169.50	437,043.20	802,550.80	2,464,554.28	4,383,539.00
Care Deemed Unnecessary	4,981.00	6,531.71	8,161.25	170.15	96,628.67	94,457.00
Room Differential	152,953.66	63,427.25	678,874.43	717,035.38	9,505,120.13	9,236,788.00
Non-Benefit Drugs	-	-	-	1,046.19	8,578.77	7,357.00
Out-Patient Services	996,822.00	272,921.10	2,100,860.55	1,237,082.37	11,622,121.80	17,059,759.00
Health Grants	67,086.27	4,265.00	-	-	1,368,925.45	407,649.00
Recoveries and Sales	759,279.90	179,090.74	1,480,360.89	1,417,951.50	10,727,230.77	11,383,015.00
Other Income	16,041.65	96,555.64	101,252.05	34,609.82	964,246.37	701,633.00
Other Deductions	19,600.00	77,698.40	-	28,537.08	1,678,827.10	1,218,752.00
Total Deductions	3,404,868.02	1,170,425.56	7,519,255.61	7,862,933.91	59,813,057.19	69,034,945.00
Net Operating Costs	10,256,246.57	2,587,870.28	23,042,446.99	21,135,770.28	189,304,093.82	257,027,878.00
2. Provincial Payments:						
Equipment	690,661.58	-	130,987.34	908,645.09	-	-
Contract Hospitals	319,422.96	23,144.76	145,405.42	94,435.35	8,796,089.32	8,449,810.00
Federal Hospitals	32,508.00	-	952,436.00	652,655.80	3,296,034.43	6,188,256.00
Out-of-Province Care	349,912.85	189,633.19	372,019.24	596,827.99	3,662,414.05	3,020,340.00
3. Authorized Charges:						
Contract Hospitals	-	-	-	-	-	-
Federal Hospitals	-	-	-	-	-	-
4. Sub-Total	11,648,751.96	2,800,648.23	24,643,294.99	23,388,334.51	205,058,631.62	274,686,284.00
5. Amounts Recovered	55,072.17	6,014.96	100,169.49	81,086.47	1,078,518.54	1,386,047.00
6. Cost of In-Patient Services (Agrees with Table F)	\$11,593,679.79	\$2,794,633.27	\$24,543,125.50	\$23,307,248.04	\$203,980,113.08	\$273,300,237.00

TABLE K (Cont'd)

	Manitoba	Saskatchewan	Alberta	British Columbia	Yukon	Northwest Territories
1. Hospitals listed in Part I of Schedule "A":						
Operating Expenses	\$43,064,161.00	\$49,637,565.52	\$66,909,641.15	\$73,084,100.84	\$ 175,085.53	\$ 275,551.13
Less:						
Ancillary Operations	-	639.09	1,216.48	1,705.00	-	-
Interest on loans	932,836.00	459,440.53	3,077,295.42	142,619.64	398.62	1,087.29
Depreciation	957,982.00	1,461,500.85	3,713,694.55	3,864,426.10	3,994.16	18,939.52
Direct Cost: Research Projects	-	5,859.00	-	259.17	-	-
Ambulance Service	1,070.00	7,041.73	-	7,901.31	-	-
O.P.D.	791,662.00	-	92,693.63	303,982.83	-	-
Unapproved Expenses	592,984.00	410,705.31	2,240,635.07	489,870.11	-	-
Offset Income:						
Federal Government	44,822.00	364,839.55	435,927.00	96,158.75	690.00	4,380.00
Workmen's Compensation	442,870.00	367,707.59	999,310.50	1,602,311.28	10,307.00	16,300.00
Non-Residents	1,309,773.00	624,276.53	844,067.78	644,762.30	2,203.00	4,205.00
Care Deemed Unnecessary	49,420.00	1,094.97	9,003.00	466,592.67	5,383.00	225.00
Room Differential	645,857.00	361,538.50	948,313.06	1,067,004.69	50.50	-
Non-Benefit Drugs	-	547,791.32	11,933.55	74,126.36	-	-
Out-Patient Services	1,419,442.00	2,992,875.59	2,100,892.52	3,068,588.05	13,788.87	21,965.71
Health Grants	73,523.00	41,530.21	195,602.61	92,130.92	-	-
Recoveries and Sales	1,962,620.00	1,361,500.09	2,165,191.93	2,561,613.43	9,289.15	4,311.83
Other Income	150,383.00	280,739.95	249,651.35	88,276.26	102.00	2,350.00
Other Deductions	122,865.00	1,048,720.87	776,027.05	60,133.11	3.46	360.00
Total Deductions	9,498,109.00	10,337,801.68	17,861,455.50	14,632,461.98	46,005.76	74,124.35
Net Operating Costs	33,566,052.00	39,299,763.84	49,048,185.65	58,451,638.86	129,079.77	201,426.78
2. Provincial Payments:						
Equipment	18,449.00	79,792.79	3,346,569.35	1,257,819.85	1,052.83	365.21
Contract Hospitals	542,590.00	208,492.78	2,046,405.88	468,113.41	177.24	322,490.08
Federal Hospitals	1,752,340.00	480,342.12	1,430,427.70	3,204,841.60	442,998.00	363,057.50
Out-of-Province Care	638,339.00	953,763.94	718,789.92	593,925.80	75,960.24	398,883.65
3. Authorized Charges:						
Contract Hospitals	-	-	516,184.50	11,041.00	-	28,813.50
Federal Hospitals	-	-	254,096.90	164,657.00	-	28,624.50
4. Sub-Total	36,517,770.00	41,022,155.47	57,360,659.90	64,152,037.52	649,268.08	1,343,661.22
5. Amounts Recovered	158,908.00	75,129.94	156,339.00	298,202.14	3,824.50	-
6. Cost of In-Patient Services (Agrees with Table F)	\$36,358,862.00	\$40,947,025.53	\$57,204,320.90	\$63,853,835.38	\$ 645,443.58	\$ 1,343,661.22

The amounts shown for room differentials in the offset income section amount to 50% of the net earnings of the hospitals from charges for private and semi-private accommodation over and above standard ward rates. In some provinces the remaining 50% of this income is left with the hospitals, while in others, varying methods are applied. In Newfoundland, Nova Scotia, Ontario and Saskatchewan the full 50% is left with the hospitals; in Quebec and British Columbia 40% is left; in New Brunswick 25%; in Manitoba 20%; while in Prince Edward Island and Alberta the hospitals do not retain any of this income.

The provincial payments to federally-owned hospitals are shown in paragraph 2 of Table K. These are payments for insured in-patient services rendered to insured persons in hospitals operated by the Departments of Veterans Affairs, National Defence and National Health and Welfare.

When insured services are furnished to a person in respect of an injury or disability, where such person is legally entitled to recover the cost of such services from some other person by way of damages, the hospital account is paid by the provincial authority, and action is then taken to recover the cost from the responsible third party. The amounts so recovered in respect of insured in-patient services are shown on the second last line of Table K.

8. Comparative Data

It has been explained previously that essential parts of the formula for the payment of contributions to the provinces, are the per capita cost of in-patient services in the provinces, and the per capita cost of in-patient services in Canada. For the final calculation of the federal contribution, these per capita costs are based on actual shareable costs as defined in the Hospital Insurance Regulations. It is possible to make comparisons with the amounts of the final contributions as set out in earlier reports to Parliament. As explained earlier in this report, in connection with the final contribution for the calendar year 1959, only seven provinces participated in the joint programme for the whole of the calendar year, Nova Scotia and Ontario having commenced on January 1, 1959. Insofar as the calendar year 1958 was concerned, only the original five provinces were participating, (Newfoundland, Manitoba, Saskatchewan, Alberta and British Columbia) and these joint programmes only commenced on July 1st of that year.

These facts should be kept in mind when reviewing the data presented in the two Tables L and M.

Table L shows the per capita cost of in-patient services and the percentage increase of these per capita costs over the previous year, by province, for the calendar years from 1958 to 1963 inclusive. The per capita costs shown for 1963, are based without exception on the shareable in-patient costs in all provinces, and show a national per capita cost of \$39.44. This represents an increase of 10.8% over the national per capita cost for 1962 which was \$35.61. This cost, in turn represented an increase of 11.4% over the per capita cost for 1961 which was \$31.97.

It should be noted that although the national per capita cost increased from year to year, the percentage of the increase from one year to another, was on a diminishing basis.

Table M shows the final cost of in-patient services for the calendar years from 1958 to 1963 inclusive, by province, and it also shows the percentage increase over the previous year for each cost figure. The amounts shown for the calendar year 1963 were, in all instances, the actual shareable costs as defined in the Hospital Insurance Regulations and the total amount of more than \$739 million represented an increase of 12.7% over the amount shown as the final cost for 1962. The final cost for 1962, which amounted to some \$656 million, was 13.4% more than the final cost in 1961.

It will be noted that the percentage increases from year to year of the final costs of in-patient services, also appear to show a downward trend from year to year. However, it must be kept in mind that the actual amounts paid for in-patient services reflect, among other things, an increasing population. This increase in population is not shown separately in the per capita figures shown in Table L.

TABLE L
PER CAPITA COST OF IN-PATIENT SERVICES, AND PERCENTAGE INCREASE
OVER PREVIOUS YEAR, BY PROVINCE, 1958 to 1963

PROVINCE	1958		1959		1960		1961		1962		1963	
	Cost	Increase	Cost	Increase	Cost	Increase	Cost	Increase	Cost	Increase	Cost	Increase
Newfoundland	\$13,7603	18.5	\$16,3039	13.0	\$18,4199	13.0	\$19,5339	6.0	\$21,4465	9.8	\$24,2039	12.9
Prince Edward Island	15,2249	2.9	15,6719	22.7	19,2321	22.7	23,0063	19.6	24,8749	8.1	26,6156	7.0
Nova Scotia	17,2940	19.7	20,6938	21.6	25,1681	21.6	28,3157	12.5	30,6205	8.1	33,4375	9.2
New Brunswick	16,4678	29.0	21,2408	29.2	27,4360	29.2	32,7226	19.3	36,1266	10.4	38,4608	6.5
Quebec	17,6582	6.1	18,7399	14.0	21,3643	14.0	26,9919	26.3	32,0059	18.6	37,4275	16.9
Ontario	22,0245	24.6	27,4516	16.0	31,8345	16.0	35,0343	10.1	38,9579	11.2	42,6898	9.6
Manitoba	22,8411	21.9	27,8516	11.8	31,1363	11.8	33,4899	7.6	35,8371	7.0	38,7208	8.0
Saskatchewan	32,0523	8.3	34,7216	7.7	37,3806	7.7	38,8121	3.8	40,8859	5.3	40,0291	7.7
Alberta	25,6619	12.4	28,8487	14.1	32,9063	14.1	35,0002	6.4	37,7881	8.0	41,0656	8.7
British Columbia	25,2616	12.2	28,3514	11.9	31,7386	11.9	34,2686	8.0	35,9866	5.0	37,9856	5.6
Yukon		-33.5	8,7075	295.2	47,9502	295.2	49,2003	2.6	55,6358	13.1	43,0296	-22.7
Northwest Territories	13,0843			308.0	26,4408	308.0	40,5183	53.2	46,1728	14.0	55,9859	21.3
CANADA	\$21,2329	16.1	\$24,6495	14.9	\$28,3140	14.9	\$31,9673	12.9	\$35,6077	11.4	\$39,4430	10.8

TABLE M
FINAL COST OF IN-PATIENT SERVICES AND PERCENTAGE INCREASE OVER PREVIOUS YEAR, BY PROVINCE,
1958 to 1963

PROVINCE	1958		1959		1960		1961		1962		1963	
	Final Cost	Percentage Increase	Final Cost	Percentage Increase	Final Cost	Percentage Increase	Final Cost	Percentage Increase	Final Cost	Percentage Increase	Final Cost	Percentage Increase
Newfoundland	\$ 5,999,505.48	21.7	\$ 7,304,160.36	21.7	\$ 8,417,909.69	15.2	\$ 8,912,638.46	5.9	\$ 10,036,939.85	12.6	\$ 11,593,679.79	15.5
Prince Edward Island	• 1,507,266.00	5.0	1,582,861.00	5.0	1,961,669.26	23.9	2,381,866.48	21.4	2,611,862.11	9.7	2,794,633.27	7.0
Nova Scotia	• 11,950,175.00	20.5	14,402,853.40	20.5	17,668,032.81	22.7	20,289,660.23	14.8	22,169,262.33	9.3	24,543,125.50	10.7
New Brunswick	• 9,403,103.00	31.7	12,383,380.45	31.7	16,269,527.62	31.4	19,306,832.90	18.7	21,675,939.40	12.3	23,307,248.04	7.5
Quebec	• 85,924,996.00	8.6	*93,324,876.00	8.6	*108,680,320.00	16.5	141,446,468.31	30.1	171,103,659.31	21.0	203,980,113.08	19.2
Ontario	• 126,839,227.00	27.9	162,184,056.06	27.9	192,471,252.07	18.7	216,933,851.00	12.7	245,201,158.25	13.0	273,300,237.00	11.5
Manitoba	19,620,464.00	24.1	24,342,268.00	24.1	27,649,032.00	13.6	30,525,227.07	10.4	33,113,476.00	8.5	36,358,862.00	9.8
Saskatchewan	28,366,242.83	10.0	31,214,755.68	10.0	33,904,161.33	8.6	35,763,267.00	5.5	37,901,226.61	6.0	40,947,025.53	8.0
Alberta	30,537,627.70	16.4	35,541,554.53	16.4	41,856,756.05	17.8	46,229,813.13	10.4	51,316,218.56	11.0	57,204,320.90	11.5
British Columbia	38,650,193.85	14.1	44,114,706.55	14.1	50,591,381.71	14.7	55,367,981.20	9.4	59,198,034.52	6.9	63,853,835.38	7.9
Yukon	•418,696.00	-31.4	*287,346.00		633,352.55		696,724.90	11.8	778,901.05	11.8	645,443.58	-17.1
Northwest Territories					555,255.80	310.2	902,103.37	62.5	1,108,146.90	22.8	1,343,661.22	21.3
CANADA	\$ 359,217,496.86	18.8	\$ 426,682,818.03	18.8	\$ 500,648,650.89	17.3	\$ 578,756,434.05	15.6	\$ 656,214,824.89	13.4	\$ 739,872,185.29	12.7

* Estimated for non-participating provinces.

PART II

This part of the report includes quantitative analyses of the volume and characteristics of hospital care, as measured in terms of facilities, services to patients, types of expenditure, and personnel. The statistical information was obtained from the Annual Returns of Hospitals. These forms are submitted by hospitals that are subject to provincial budget approval ("budget review hospitals"); hospitals owned and operated by the federal government; and by some industrial and private hospitals that provide insured hospital services under contract ("contract hospitals"). Additional data on patients are based on morbidity statistics made available to this department by the provinces.

1. Utilization of Hospital Care

a) Days of Care

Between 1963 and 1964⁽¹⁾, the insured population increased from 18,584,000 to 19,011,000 or by 2.3 per cent. At the same time, the number of insured patient-days was increasing from 34,082,000 to 35,280,000⁽²⁾ or by 3.5 per cent. Correspondingly, increases between 1962 and 1963 were 2.2 per cent in population, 4.1 per cent in days (Table 1).

The total number of patient-days in hospitals listed in the hospital insurance agreements increased in 1964 by 2.8 per cent (Table 2), as compared with an increase of 3.5 per cent in the number of insured patient-days; this may be explained by the fact that the increase in insured patient-days was partially offset by smaller increases or declines in other forms of responsibility for payment (e. g., federal responsibility days) and a sharp reduction in the proportion of days undistributed as to responsibility. Of the total days, 90.8 per cent⁽³⁾ were provided as insured days to residents of the province in which the hospital was located, 4.8 per cent were the responsibility of the federal government, 1.6 per cent were paid for by the Workmen's Compensation Boards, 1.5 per cent were provided to non-residents of the province (including persons insured under plans of other provinces), 0.5 per cent were provided to insured residents but were not the responsibility of their plan, 0.5 per cent were provided to uninsured residents, and 0.3 per cent were undistributed as to responsibility for payment (Table A1).

- (1) Note that data for 1960 and 1964 and trends involving these two years will be affected by the extra day in them.
- (2) Excluding care rendered to an insured person when he is away from his home province.
- (3) Throughout this part of the report, percentages and rates are rounded to the nearest tenth and, consequently, may not add precisely to the total shown for a distribution.

TABLE 1

INSURED PATIENT-DAYS DURING YEAR, WITHIN RESPECTIVE PROVINCES, ADULTS AND CHILDREN IN REPORTING HOSPITALS LISTED IN HOSPITAL INSURANCE AGREEMENTS, NUMBER AND RATES PER THOUSAND INSURED POPULATION, BY PROVINCE, 1961-1964⁽¹⁾

Province	Insured Patient-days During Year (2)				Insured Patient-days Per Thousand Insured Population (3)				Insured Population (3)			
	1961	1962	1963	1964	1961	1962	1963(4)	1964(5)	1961	1962	1963(4)	1964(5)
Newfoundland	536,918	558,682	588,959	647,959	1,176.8	1,193.8	1,229.6	1,322.4	456,265	468,000	479,000	490,000
Prince Edward Island	149,805	164,812	165,890	166,190	1,722.3	1,797.9	1,579.9	1,567.8	86,979	91,564	105,000	106,000
Nova Scotia	1,051,424	1,080,556	1,118,554	1,173,051	1,467.3	1,492.5	1,523.9	1,587.3	716,752	724,000	734,000	739,000
New Brunswick	976,537	1,003,107	1,031,860	1,066,984	1,655.1	1,671.8	1,702.7	1,752.0	590,015	600,000	606,000	609,000
Quebec	8,077,091	8,686,653	9,247,563	9,702,623	1,541.3	1,624.9	1,696.8	1,749.5	5,240,328	5,346,000	5,450,000	5,546,000
Ontario	11,141,030	11,664,504	12,099,892	12,542,986	1,889.0	1,915.2	1,930.4	1,935.0	5,897,909	6,090,437	6,268,198	6,481,996
Manitoba	1,613,598	1,705,350	1,750,677	1,794,648	1,777.7	1,855.0	1,914.9	1,938.7	907,665	919,343	914,231	925,715
Saskatchewan ⁽⁶⁾	1,997,712	1,965,028	2,091,295	2,135,453	2,242.9	2,195.7	2,286.1	2,297.0	890,678	894,956	914,774	929,685
Alberta	2,944,358	3,084,441	3,116,612	3,140,045	2,229.1	2,271.3	2,237.3	2,211.3	1,320,844	1,358,000	1,393,000	1,420,000
British Columbia	2,707,098	2,752,392	2,808,885	2,850,357	1,675.5	1,673.2	1,671.0	1,653.3	1,615,707	1,645,000	1,681,000	1,724,000
Yukon	24,871	27,836	20,126	18,334	1,756.3	1,988.3	1,341.7	1,222.3	14,161	14,000	15,000	15,000
Northwest Territories	27,402	31,811	42,596	41,676	1,230.8	1,325.5	1,774.8	1,667.0	22,264	24,000	24,000	25,000
CANADA ⁽⁶⁾	31,247,844	32,725,162	34,082,909	35,280,306	1,759.5	1,800.5	1,834.0	1,855.7	17,759,567	18,175,400	18,584,203	19,011,396

(1) Note that figures for 1964 and trends involving 1964 will be altered by the extra day in that year.

(2) Excludes out-of-province insured hospital care.

(3) Based on annual average number of insured persons under Provincial Plans approved for purposes of payment of shareable costs.

(4) Final population figures differ slightly from preliminary estimates, 1963.

(5) Preliminary estimates, 1964.

(6) Saskatchewan figures for 1963 have been revised subsequent to publication in last year's annual report.

Source: Table A1, and previous Annual Reports.

TABLE 2

TOTAL PATIENT-DAYS DURING YEAR, ADULTS AND CHILDREN, IN REPORTING HOSPITALS LISTED
IN HOSPITAL INSURANCE AGREEMENTS, NUMBER AND PERCENTAGE DISTRIBUTION AND TOTAL RATE
PER THOUSAND POPULATION, BY RESPONSIBILITY FOR PAYMENT, CANADA, 1961 - 1964(1)

	Number				Per Cent			
	1961	1962	1963 (2)	1964	1961	1962	1963 (2)	1964
Provincial Plan	31,247,844	32,725,162	34,082,909	35,280,306	87.8	89.2	90.1	90.8
Insured Residents Care Not Responsibility of Provincial Plan	145,998	288,042	228,188	195,475	0.4	0.8	0.6	0.5
Uninsured Residents of Province	301,748	237,529	222,493	193,149	0.8	0.6	0.6	0.5
Non-residents of Province	472,450	530,364	555,794	592,867	1.3	1.4	1.5	1.5
Workmen's Compensation Boards	584,703	577,328	577,253	621,205	1.6	1.6	1.5	1.6
Federal Government	2,226,079	1,951,432	1,885,415	1,865,214	6.3	5.3	5.0	4.8
Undistributed Patient-days	620,495	392,754	275,363	125,226	1.7	1.1	0.7	0.3
TOTAL	35,599,317	36,702,611	37,827,415	38,873,442	100.0	100.0	100.0	100.0
Total Per Thousand Population (3)	1,951.9	1,976.4	2,001.9	2,021.0	xx	xx	xx	xx

(1) Note that figures for 1964 and trends involving 1964 will be altered by the extra day in that year.

(2) Includes 1963 revisions for Saskatchewan made subsequent to publication of last year's annual report.

(3) Based on 1961 Population Census and on the D.B.S. Intercensal Population Estimates as at June 1.

Source: Table A1.

Of the total of 38,873,442 patient-days during the year, 26,941,411 patient-days, or 69.3 per cent of the total, were provided in standard wards and the remaining 11,932,031, or 30.7 per cent, were in private and semi-private rooms. The budget review hospitals provided 87.1 per cent of the total patient-days and the contract and federal hospitals provided 5.2 per cent and 7.7 per cent respectively. The budget review hospitals provided 85.1 per cent of the standard ward care and 91.4 per cent of the private and semi-private care. The proportion of the total days of care in the budget review hospitals provided in standard wards ranged from 89.7 per cent in Newfoundland to 58.7 per cent in Quebec (Tables 3, A2, A3).

The number of insured patient-days per thousand of the insured population increased during 1964 by 1.2 per cent from 1,834.0 to 1,855.7. In Newfoundland, Nova Scotia, New Brunswick, Quebec, Ontario, Manitoba, and Saskatchewan, there were increases, ranging from 7.5 per cent in Newfoundland to 0.2 per cent in Ontario. The ratio decreased by 0.8 per cent in Prince Edward Island, 1.2 per cent in Alberta, and 1.1 per cent in British Columbia (Table 1).

The number of patient-days per thousand population is affected by a number of factors, such as: age distribution of population, incidence of illness, type of illness, rate of admission for each type of illness, and the length of stay for each type of illness. Since none of the factors applies equally in all the provinces, since there are differences in the insuring of nonactive-treatment days, and since the pattern of facilities available varies geographically, it would be misleading to use the increase or decrease in the number of patient-days per insured person in an interprovincial comparison of, for example, effectiveness of hospital treatment.

b) Admissions and Separations

The number of admissions to hospitals listed in hospital insurance agreements per thousand population (Table 4) increased from 157.7 in 1961 to 161.0 in 1963, and 162.0 in 1964. Compared with 1963, there were slight reductions in 1964 in Manitoba, Saskatchewan, and British Columbia. Saskatchewan was consistently highest among the provinces with 215.6 per thousand population in 1961 and 224.3 per thousand population in 1964. Table A4 sets out the number and rates of separations by province, showing a trend similar to that for admission rates.

TABLE 3

TOTAL PATIENT-DAYS DURING YEAR, ADULTS AND CHILDREN, IN REPORTING HOSPITALS LISTED
IN HOSPITAL INSURANCE AGREEMENTS, NUMBER AND PERCENTAGE DISTRIBUTION, BY STATUS
OF HOSPITAL AND BY TYPE OF ACCOMMODATION, CANADA, 1961 - 1964 ⁽¹⁾

	Budget Review		Contract		Federal Government		Total	
	Number	Per Cent	Number	Per Cent	Number	Per Cent	Number	Per Cent
Standard Ward								
1961	20,686,869	82.7	1,379,903	5.5	2,949,907	11.8	25,016,679	100.0
1962	21,458,461	83.4	1,237,814	4.8	3,031,125	11.8	25,727,400	100.0
1963 ⁽²⁾	22,100,186	83.8	1,241,812	4.7	3,042,415	11.5	26,384,413	100.0
1964	22,935,218	85.1	1,080,303	4.0	2,925,890	10.9	26,941,411	100.0
Private and Semi-Private Rooms								
1961	9,687,562	93.6	662,974	6.4	1,572	*	10,352,108	100.0
1962	10,047,633	92.2	755,312	6.9	97,285	0.9	10,900,230	100.0
1963 ^(*)	10,540,197	92.1	896,965	7.8	5,840	0.1	11,443,002	100.0
1964	10,907,082	91.4	954,724	8.0	70,225	0.6	11,932,031	100.0
Total								
1961	30,374,431	85.9	2,042,877	5.8	2,951,479	8.3	35,368,787	100.0
1962	31,506,094	86.0	1,993,126	5.5	3,128,410	8.5	36,627,630	100.0
1963 ⁽²⁾	32,640,383	86.3	2,138,777	5.7	3,048,255	8.1	37,827,415	100.0
1964	33,842,300	87.1	2,035,027	5.2	2,996,115	7.7	38,873,442	100.0

(1) Note that figures for 1964 and trends involving 1964 will be altered by the extra day in that year.

(2) Includes 1963 revisions for Saskatchewan made subsequent to publication of last year's annual report.

* Less than 0.05.

Source: Annual Returns of Hospitals.

TABLE 4

TOTAL ADMISSIONS, ADULTS AND CHILDREN, IN HOSPITALS LISTED IN HOSPITAL INSURANCE AGREEMENTS,
NUMBER AND RATES PER THOUSAND POPULATION, BY PROVINCE, 1961 - 1964 (1)

Province	Admissions During Year				Admissions Per Thousand Population			
	1961	1962	1963	1964	1961	1962	1963	1964
Newfoundland	50,915	54,451	56,352	58,835	111.2	115.9	117.2	119.8
Prince Edward Island	16,225	16,905	17,099	17,372	155.1	159.5	159.8	162.4
Nova Scotia	109,270	110,163	111,204	114,036	148.3	147.7	147.1	150.0
New Brunswick	104,333	104,635	105,950	108,213	174.5	172.4	172.6	175.4
Quebec	725,535	747,654	771,123	788,590	138.0	139.3	141.0	141.8
Ontario	949,771	970,460	1,009,102	1,040,030	152.3	153.0	156.5	157.9
Manitoba	165,555	170,534	175,689	176,113	179.6	182.4	184.9	183.8
Saskatchewan	199,448	195,942	211,275	211,495	215.6	210.7	226.4	224.3
Alberta	261,617	268,952	273,778	283,880	196.4	196.3	194.9	198.2
British Columbia	285,835	292,067	301,119	307,190	175.4	176.1	177.7	176.7
Yukon	3,491	3,643	3,296	2,931	238.6	242.9	219.7	183.2
Northwest Territories	4,554	6,003	6,775	6,533	198.0	250.1	282.3	261.3
CANADA	2,876,549	2,941,409	3,042,762	3,115,218	157.7	158.4	161.0	162.0

(1) Note that figures for 1964 and trends involving 1964 will be altered by the extra day in that year.

c) Average Length of Stay

Average length of stay has been computed on the basis of total days' stay since admission⁽¹⁾ and on the basis of days' stay during the year⁽²⁾. The results appear in Tables 5, 6, and A5. The discussion that follows relates to length of stay since admission.

With respect to budget review general hospitals there was a moderate increase in average stay, which had been 10.0 days in 1961 and 10.1 days in 1962 and 1963 and which was 10.2 days in 1964. The range of the provincial average stay figures in 1964 was from 13.4 days in Newfoundland to 8.9 days in Alberta. Apart from Newfoundland, only three provinces -- Ontario, Quebec, and Nova Scotia -- had lengths of stay above the national average. Furthermore, only three provinces altogether -- Nova Scotia, Ontario, and Manitoba -- reflected the national situation to the extent of having increased average lengths of stay in 1964. It should be noted that the average length of stay in general hospitals is modified by the arrangements for the provision of hospital care in the various provinces. For instance, in some provinces, convalescent care and chronic care are provided predominantly in large general hospitals while in other provinces, this type of care is provided mainly in special hospitals.

Table A6 reveals that in Ontario and Alberta very large proportions (30.0 per cent and 45.5 per cent respectively) of the patient-days in all types of hospitals were provided to patients who stayed two months or more. This reflects the provision of a great deal of long-term care in chronic hospitals and nursing homes under their insurance programs.

There is a positive correlation between size of hospital and average length of stay; in budget review hospitals with rated bed capacity of up to 9 beds the average length of stay was 7.2 days, while in hospitals with 1,000-and-over rated bed capacity the average length of stay was 13.9 days (Table A7). Table 7 reveals that one in every four patients left hospital within three days and half within six. At the other extreme, one in 59 stayed sixty days or more, but that one accounted for a full quarter of the patient-days.

(1) Patient-days since admission, even if provided in a previous year, for patients separated during the year, divided by the number of separations.

(2) Patient-days provided (to any patient) during the year divided by the number of separations.

TABLE 5

AVERAGE LENGTH OF STAY (IN DAYS), ADULTS AND CHILDREN, IN HOSPITALS LISTED IN HOSPITAL INSURANCE AGREEMENTS, BY TYPE OF HOSPITAL, CANADA, 1961-1964

Year	Budget Review General	Budget Review Chronic and Con- valescent	Other Budget Review Special	All Budget Review	Contract	Federal Govt.	Total
Patient-days Since Admission Divided by Separations:							
1961	10.0	171.3	18.5	11.0	15.2	35.4	11.7
1962	10.1	162.7	19.1	11.3	17.0	34.9	12.2
1963	10.1	180.3	22.4	11.4	18.0	39.5	12.4
1964	10.2	147.5	14.4	11.5	16.2	39.6	12.4
Patient-days During Year Divided by Separations:							
1961	10.1	207.8	19.5	11.3	18.5	38.2	12.2
1962	10.1	172.2	20.3	11.3	18.3	34.6	12.3
1963	10.1	179.4	21.7	11.4	18.8	36.7	12.3
1964	10.2	150.8	14.6	11.5	19.8	37.1	12.4

Source: Table A5 and Annual Reports.

TABLE 6
AVERAGE LENGTH OF STAY (IN DAYS), ADULTS AND CHILDREN,
IN BUDGET REVIEW GENERAL HOSPITALS, BY PROVINCE, 1961-1964

Province	Patient-days Since Admission Divided by Separations				Patient-days During Year Divided by Separations			
	1961	1962	1963	1964	1961	1962	1963	1964
Newfoundland	11.4	12.9	13.4	13.4	11.4	10.8	11.2	11.7
Prince Edward Island	9.9	9.8	9.9	9.5	9.8	10.0	9.8	9.7
Nova Scotia	9.8	10.1	10.3	10.6	9.9	10.1	10.4	10.6
New Brunswick	9.4	9.8	10.1	9.9	9.8	10.0	10.1	9.9
Quebec	10.4	10.3	10.3	10.3	10.5	10.5	10.3	10.4
Ontario	10.4	10.7	10.7	10.8	10.5	10.7	10.8	10.9
Manitoba	8.9	9.0	8.8	9.1	8.9	9.0	9.0	9.1
Saskatchewan	9.7	9.6	9.5	9.5	9.7	9.6	9.5	9.5
Alberta	9.0	9.2	9.0	8.9	9.0	9.1	8.9	8.9
British Columbia	9.7	9.5	9.5	9.4	9.6	9.5	9.5	9.4
Yukon	8.5	9.5	7.7	6.6	9.2	8.5	7.7	6.6
Northwest Territories	6.7	6.6	8.5	8.1	6.8	6.7	8.7	7.7
CANADA	10.0	10.1	10.1	10.2	10.1	10.1	10.1	10.2

Source: Table A5 and Annual Reports.

TABLE 7

SEPARATIONS AND PATIENT-DAYS OF SEPARATIONS BY LENGTH-OF-STAY GROUPINGS,
NUMBER AND PERCENTAGE DISTRIBUTION FROM BOTH SEXES AND ALL AGES,
PROVINCIAL PLAN IN-PATIENTS, CANADA⁽¹⁾, 1964

Length of Stay (in days)	Number ⁽¹⁾		Per Cent ⁽¹⁾	
	Separations	Days of Separations	Separations	Days of Separations
1	242,998	243,038	8.4	0.7
2	297,608	595,270	10.3	1.7
3	219,410	685,211	7.6	1.9
4 - 6	747,229	3,746,972	26.0	10.7
7 - 10	550,188	4,527,338	19.1	12.9
11 - 14	277,291	3,419,141	9.6	9.7
15 - 29	362,246	7,306,959	12.6	20.8
30 - 59	131,644	5,241,841	4.6	14.9
60+	50,237	9,334,474	1.7	26.6
TOTAL	2,878,851	35,073,244	100.0	100.0

(1) Excludes Nova Scotia and New Brunswick; the apparent discrepancies between 'separations' and 'days of separations' with one, two, and three days of stay occur in the data as submitted by the provinces.

2. Hospital Bed Facilities and Occupancy

a) Hospital Beds

At the end of 1964, the Federal-Provincial hospital insurance agreements listed 1,313 hospitals and 34 "other facilities"⁽¹⁾ (Table A8). Of the hospitals, 976 were budget review institutions, 251 were contract hospitals, and 86 were owned by the federal government. Eighteen of the 1,313 hospitals did not submit reports. As shown in Table A9, the 1,295 reporting hospitals had 132,623 beds set up for patients at the end of 1964. Of this total, 114,901 or 86.6 per cent were in budget review hospitals, 6,954 or 5.2 per cent in contract hospitals, and 10,768 or 8.1 per cent in federal hospitals.

Table 8 shows that the number of beds set up in reporting hospitals increased between 1963 and 1964 by 2.7 per cent, rising from 129,158 to 132,623. Furthermore, the 18 hospitals that did not report in 1964 had had 203 beds and cribs at the end of 1963. Assuming that they still had the same number of beds at the end of 1964, the 1964 bed total would be 132,826 instead of 132,623 producing a percentage increase of 2.8 over 1963.

The ratio of the number of hospital beds to population in 1964 was 6.9 per thousand and varied across Canada from 5.2 beds per thousand people in Newfoundland to 8.9 beds in Alberta (Table 9). Between 1963 and 1964, the ratio of hospital beds to population decreased slightly only in British Columbia whereas it increased slightly in Newfoundland, Nova Scotia, Saskatchewan, and Alberta. In Prince Edward Island, Quebec, Ontario and Manitoba the ratio remained unchanged.

At the end of 1964, 56.9 per cent of the beds set up in reporting hospitals were classified as "general" beds, 10.4 per cent were obstetric beds, 12.2 per cent were paediatric beds, 2.4 per cent were psychiatric beds, and the remaining 18.1 per cent were chronic and convalescent beds (Table 10). It is notable that more than half the beds in contract hospitals and more than one-third of those in federal hospitals are chronic and convalescent beds in contrast with the less than one-seventh of beds so assigned in budget review hospitals. On the other hand, the budget review hospitals had substantially larger proportions of obstetric and paediatric beds than either the contract or the federal hospitals.

(1) "Other facilities" include laboratories, Red Cross blood depots, and other cancer clinics.

TABLE 8

NUMBER OF HOSPITALS LISTED IN HOSPITAL INSURANCE AGREEMENTS,
NUMBER OF HOSPITALS REPORTING, BEDS AND CRIBS SET UP ON
DECEMBER 31, AND RATE PER 1,000 POPULATION IN PARTICIPATING
PROVINCES, CANADA, 1959-1964

Year	Number of Hospitals Listed In Provincial Agreements	Number of Hospitals Reporting	Beds and Cribs Set Up on December 31	
			Number	Rate Per 1,000 Population
1959	944	920	81,270	6.5
1960	1,052	1,024	86,178	6.8
1961	1,340 ⁽¹⁾	1,311	121,046	6.6
1962	1,305 ⁽²⁾	1,282	124,883	6.7
1963	1,291 ⁽³⁾	1,291	129,158	6.8
1964	1,313 ⁽⁴⁾	1,295 ⁽⁵⁾	132,623	6.9

Excludes 26 "other facilities" listed in 1961.

Excludes 33 "other facilities" listed in 1962.

Excludes 35 "other facilities" listed in 1963.

Excludes 34 "other facilities" listed in 1964.

This figure excludes 18 hospitals, with an estimated 203 beds, that did not submit annual returns (reasons for non-report include not being in operation, not providing in patient services, and not having sufficient staff to complete the form); all 18 remain on the lists in the agreements.

Source: Table A8 and Annual Reports for 1964.

TABLE 9

BEDS AND CRIBS SET UP ON DECEMBER 31, TOTAL AND PER THOUSAND POPULATION, ADULTS AND CHILDREN, IN HOSPITALS LISTED IN HOSPITAL INSURANCE AGREEMENTS, BY PROVINCE, 1961-1964.

Province	Number				Beds Per Thousand Population			
	1961	1962	1963	1964	1961	1962	1963	1964
Newfoundland	1,982	2,152	2,403	2,542	4.3	4.6	5.0	5.2
Prince Edward Island	651	674	629	628	6.2	6.4	5.9	5.9
Nova Scotia	4,138	4,241	4,469	4,537	5.6	5.7	5.9	6.0
New Brunswick	3,709	3,861	4,008	4,131	6.2	6.4	6.5	6.7
Quebec	32,338	32,816	33,823	34,469	6.1	6.1	6.2	6.2
Ontario	41,389	43,035	44,965	46,390	6.6	6.8	7.0	7.0
Manitoba	6,685	6,970	6,951	6,992	7.3	7.5	7.3	7.3
Saskatchewan	7,578	7,573	7,769	7,937	8.2	8.1	8.3	8.4
Alberta	11,382	11,733	12,034	12,804	8.5	8.6	8.6	8.9
British Columbia	10,710	11,236	11,464	11,555	6.6	6.8	6.8	6.6
Yukon	157	160	161	152	10.7	10.7	10.7	9.5
Northwest Territories	327	432	482	486	14.2	18.0	20.1	19.4
CANADA	121,046	124,883	129,158	132,623	6.6	6.7	6.8	6.9

Source: Table A8 and Annual Reports for 1964.

TABLE 10

BEDS AND CRIBS SET UP ON DECEMBER 31, ADULTS AND CHILDREN, IN HOSPITALS LISTED IN HOSPITAL INSURANCE AGREEMENTS, NUMBER AND PERCENTAGE DISTRIBUTION, BY STATUS OF HOSPITAL AND BY TYPE OF UNIT, CANADA, 1964

TYPE OF UNIT	Number				Per Cent			
	All Budget Review	Contract	Federal Government	All Hospitals	All Budget Review	Contract	Federal Government	All Hospitals
Acute Treatment:								
General	68,608	1,863	5,042	75,513	59.7	26.8	46.8	56.9
Obstetric	13,188	430	147	13,765	11.5	6.2	1.4	10.4
Paediatric	15,458	305	414	16,177	13.4	4.4	3.8	12.2
Psychiatric	1,805	1	1,395	3,201	1.6	*	13.0	2.4
Total	99,059	2,599	6,998	108,656	86.2	37.4	65.0	81.9
Chronic and Convalescent	15,842	4,355	3,770	23,967	13.8	62.6	35.0	18.1
Combined Total	114,901	6,954	10,768	132,623	100.0	100.0	100.0	100.0
Number of Hospitals Reporting	975	245	75	1,295 (1)	--	--	--	--

* Less than 0.05

(1) 18 hospitals did not submit a return:

1 Budget Review Hospital
6 Contract Hospitals
11 Federal Hospitals

Source: Tables A11 and A12.

However, the chronic and convalescent beds increased from 20,874 in 1963 to 23,967 in 1964 and accounted for nearly all the increase in the total number of beds from 129,158 in 1963 to 132,623 in 1964.

It should however be mentioned that the assignment of patients to beds does not necessarily correspond to the patient's own category. Particularly is this so in very small hospitals, where the beds will all be described as "general" but must provide for patients of all types.

Slightly over half the budget review general hospitals (Tables A10 and A11) had less than 50 beds each and 83.5 per cent were smaller than 200 beds. On the other hand, almost 60 per cent of the beds were in hospitals with 200 or more beds while the hospitals with less than 50 beds had only 11 per cent of the total budget review general hospital beds.

b) Occupancy of Hospital Beds

Year-to-year comparison of the average percentage occupancy figures for hospitals listed in hospital insurance agreements (Table 11) shows that there was little change between 1961 and 1964 except for contract hospitals, where the percentage occupancy increased from 76.2 in 1961 to 79.9. In budget review general hospitals the percentage occupancy remained unchanged. In budget review chronic and convalescent hospitals it went up from 90.6 in 1961 to 93.0 in 1962 and down to 87.2 in 1964.

The average percentage occupancy in the budget review general hospitals on a provincial basis (Table 12) varied from 82.5 per cent in Ontario to 75.2 per cent in Alberta. The average percentage occupancy between 1963 and 1964 increased in Newfoundland, Nova Scotia, Ontario, and Alberta, but remained unchanged in Quebec and Prince Edward Island. In New Brunswick, Manitoba, Saskatchewan, and British Columbia the percentage of occupancy declined slightly. Tables A14 and A15 show the average percentages of occupancy by province in 1964 for different categories of hospital.

Table A15 demonstrates that percentage occupancy varies directly with size of hospital; in budget review hospitals in 1964 it ranged from 51.2 per cent in hospitals with less than 10 beds to 88.1 per cent in hospitals with 1,000 or more beds. It is to be noted that the vacancy of one bed in a small hospital has much more arithmetic effect on the percentage of occupancy than a similar vacancy in a large hospital.

TABLE 11

AVERAGE PERCENTAGE OCCUPANCY, HOSPITALS LISTED IN HOSPITAL
INSURANCE AGREEMENTS, BY STATUS OF HOSPITAL, CANADA,
1961 - 1964

	1961	1962	1963	1964
Budget Review General	80.3	80.3	80.3	80.5
Budget Review Chronic and Convalescent	90.6	93.0	90.4	87.2
Other Budget Review Special	77.7	75.0	78.3	75.3
All Budget Review	81.2	81.4	81.0	81.2
Contract	76.2	80.5	82.1	79.9
Federal Government	75.4	75.8	73.9	75.8

Source: Table A13 and Annual Returns of Hospitals.

TABLE 12

AVERAGE PERCENTAGE OCCUPANCY, BUDGET REVIEW GENERAL
HOSPITALS, BY PROVINCE, 1961 - 1964

PROVINCE	1961	1962	1963	1964
Newfoundland	81.2	77.3	74.6	79.8
Prince Edward Island	69.8	71.2	76.0	76.0
Nova Scotia	77.6	77.7	75.7	78.6
New Brunswick	84.3	81.5	80.9	80.1
Quebec	80.7	81.4	81.3	81.3
Ontario	82.3	82.3	82.3	82.5
Manitoba	77.4	78.2	78.4	79.9
Saskatchewan	76.0	74.5	77.8	76.5
Alberta	76.4	76.3	74.1	75.2
British Columbia	81.0	82.0	82.2	81.2
Yukon	41.7	41.2	39.2	32.6
Northwest Territories	44.2	41.5	61.7	49.5
CANADA	80.3	80.3	80.3	80.5

Source: Table A14 and Annual Reports.

c) Hospitalization of Newborns

Between the years 1962 and 1964 the number of bassinets set up (Table 13) in reporting hospitals listed in the hospital insurance agreements increased by 416 in 1963 and 170 in 1964.

Reflecting the reduction in the number of live births in Canada between 1962 and 1964 (the number fell from 470,000 to 453,000, a drop of 3.6 per cent), the number of newborn infants who left hospital went down from 456,000 in 1962 to 446,000 in 1964, a 2.2 per cent reduction.

3. Hospital Expenditures

The total gross operating costs⁽¹⁾ of all budget review hospitals in Canada (Table 14) increased by 11.8 per cent from \$878,103,067 in 1963 to \$981,662,000 in 1964; the corresponding increase between 1962 and 1963 had been 12.2 per cent. In Newfoundland, operating costs increased in 1964 by 19.0 per cent, in Nova Scotia by 13.0 per cent, and in Quebec by 15.4 per cent; in all other provinces the degree of increase was equal to or less than the 11.8 per cent national increase. The \$36,700,000 increase in Ontario accounted for 35.4 per cent, and the \$38,200,000 rise in Quebec for 36.9 per cent, of the \$103,600,000 national increase. The percentage rise for five provinces in 1964 was lower than the percentage rise in 1963, while the other five provinces experienced a higher percentage increase in 1964 than in the previous year.

Among the main factors contributing to the rise of hospital operating costs have been the growth of staff-patient ratios and payroll costs, the continuing application of new techniques and equipment in medical care, price inflation, population growth, and increased utilization of hospitals per unit of population.

Table 15, which relates expenditures to patient-days, indicates the degree to which hospital costs have been increasing in relation to volume of care. The change in costs per patient-day was from \$27.06 in 1963 to \$29.23 in 1964. Among the ten provinces in 1964, these costs ranged from \$22.65 in Prince Edward Island to \$32.32 in Quebec; in Nova Scotia, Quebec, and Ontario they were above the national average of \$29.23. The percentage increase from 1963 to 1964 in per-patient-day operating costs in six provinces was lower than the national increase of 8.0 per cent, and excluding the territories, all the increases ranged from 12.3 per cent in Newfoundland to 2.3 per cent in Manitoba.

(1) Gross operating costs or "revenue fund expenditures" include some cost items that are not sharable under the federal-provincial agreements.

TABLE 13

BASSINETS, PATIENT-DAYS DURING YEAR, SEPARATIONS,
AND AVERAGE LENGTH OF STAY OF NEWBORNS, IN HOSPITALS,
LISTED IN HOSPITAL INSURANCE AGREEMENTS, CANADA
1961 - 1964 ^(a)

	1961	1962	1963	1964
Bassinets	16,135	17,604	18,020	18,190
Patient-Days During Year	2,781,363	2,965,055	3,045,352	2,978,650
Separations	438,728	456,185	454,485	446,153
Average Length of Stay	6.3	6.5	6.7	6.7

(a) Note that figures for 1964 and trends involving 1964 will be altered by the extra day in that year.

Source: Table A15 and Annual Returns of Hospitals.

TABLE 14
REVENUE FUND EXPENDITURES OF ALL BUDGET REVIEW HOSPITALS, BY PROVINCE, 1959 - 1964 (1)

PROVINCE	Date of inception of federal provincial program	1959		1960		1961		1962		1963		1964	
		Amount		Amount	Per Cent Gain Over 1959	Amount	Per Cent Gain Over 1960	Amount	Per Cent Gain Over 1961	Amount	Per Cent Gain Over 1962	Amount	Per Cent Gain Over 1963
		\$		\$		\$		\$		\$		\$	
Newfoundland	1/7/58	8,190,684		9,436,015	15.2	10,503,086	11.3	12,170,769	15.9	13,871,005	14.0	16,510,131	19.0
Prince Edward Island	1/10/59	—		2,575,236	—	3,196,662	24.1	3,343,693	4.6	3,591,564	7.4	3,976,124	10.7
Nova Scotia	1/1/59	18,601,394		22,158,661	19.1	24,911,388	12.4	27,355,067	9.8	30,366,474	11.0	34,270,153	12.9
New Brunswick	1/7/59	—		20,842,604	—	23,752,195	14.0	26,084,877	9.8	28,998,366	11.2	31,220,584	7.7
Quebec	1/1/61	—		—	—	181,950,631	—	212,216,642	16.6	247,140,470	16.5	285,304,571	15.4
Ontario	1/1/59	196,420,820		230,264,746	17.2	258,880,912	12.4	292,542,269	13.0	325,987,569	11.4	362,682,132	11.3
Manitoba	1/7/58	29,008,256		32,368,470	11.6	35,744,290	10.4	38,992,907	9.1	42,915,730	10.1	45,201,540	5.3
Saskatchewan	1/7/58	37,301,138		38,729,329	3.8	40,063,624	3.4	42,216,251	5.4	46,029,533	9.0	50,803,179	10.4
Alberta	1/7/58	43,145,759		47,058,143	9.1	51,678,260	9.8	57,958,355	12.2	64,752,983	11.7	72,389,591	11.8
British Columbia	1/7/58	52,353,677		59,618,610	13.9	64,543,328	8.3	69,074,366	7.0	73,998,737	7.1	78,878,007	6.6
Yukon	1/7/60	—		—	—	165,771	—	180,728	9.0	175,085	-3.1	155,875	-11.0
Northwest Territories	1/4/60	—		—	—	244,400	—	254,753	4.2	275,551	8.2	270,113	-2.0
CANADA	—	385,021,728		463,051,814	—	595,634,547	—	782,390,677	12.5	878,103,067	12.2	981,662,000	11.8

(1) Note that figures for 1960 and 1964 and trends involving these years will be altered by the extra day in them.

Source: Table A17, and previous Annual Reports.

TABLE 15

REVENUE FUND EXPENDITURES OF ALL BUDGET REVIEW HOSPITALS PER
PATIENT-DAY ⁽¹⁾ BY PROVINCE, 1959 - 1964

PROVINCE	1959	1960	1961	1962	1963	1964
	\$	\$	\$	\$	\$	\$
Newfoundland	17.66	19.75	20.00	21.69	23.34	26.20
Prince Edward Island	-	16.74	19.04	18.80	20.46	22.65
Nova Scotia	18.56	21.45	23.66	25.37	27.36	29.36
New Brunswick	-	21.34	23.72	25.57	27.51	28.64
Quebec	-	-	22.63	25.58	28.84	32.32
Ontario	20.29	22.47	24.26	26.14	27.97	29.82
Manitoba	18.64	20.79	21.94	23.18	24.89	25.47
Saskatchewan	19.86	20.39	21.18	22.82	23.41	25.84
Alberta	17.36	18.49	20.42	21.65	23.28	24.45
British Columbia	21.75	22.60	23.85	25.50	26.42	27.98
Yukon	-	-	29.43	33.41	45.32	50.25
Northwest Territories	-	-	34.45	38.24	27.80	33.87
CANADA	19.77 ⁽²⁾	21.31 ⁽²⁾	23.01	25.03	27.06	29.23

(1) Patient-days during year for adults and children, excluding newborns.

(2) Average for seven participating provinces.

(3) Average for nine participating provinces.

Source: Table A18 and previous Annual Reports.

Of the total national increase in per-patient-day costs in 1964, 74.2 per cent was made up of the increase in salaries and wages, 21.7 per cent represented the increase in other departmental expense items, and the remaining 4.1 per cent was due to an increase in non-departmental revenue fund expenses⁽¹⁾. Considered separately, the cost of labour per patient-day in 1964 increased 9.3 per cent; medical and surgical supplies, 9.5 per cent; drugs, 5.7 per cent; raw food, 2.0 per cent; and other departmental supplies and expenses, 6.9 per cent.

In budget review hospitals the salary and wage component accounted in 1964 for 64.6 per cent of total revenue fund expenditures, varying from 52.7 per cent in Newfoundland to 67.5 per cent in British Columbia; other departmental supplies and expense accounted for 28.2 per cent, and non-departmental items made up the balance of 7.1 per cent. Revenue fund expenditures by type of account in 1964 are shown in the appendix tables A17, A18, A19, and A20.

The per capita national average operating cost (Table 16) in all budget review hospitals in 1964 amounted to \$51.04 or 9.8 per cent higher than the 1963 figure of \$46.47. On a provincial basis, it ranged in 1964 from \$33.63 in Newfoundland to \$55.07 in Ontario. Only in Quebec, Ontario, and Saskatchewan was the per capita hospital operating cost in 1964 above the national average of \$51.04. This situation was in striking contrast to that existing in 1961, when in New Brunswick, Ontario, Manitoba, Saskatchewan, Alberta, and British Columbia, per capita costs had been higher than the national average.

Among the factors that can significantly affect interprovincial variations in the per-patient-day and per-capita operating costs of budget review hospitals are differences in the cost of labour, varying degrees of intensity of utilization of services, and differences in the scope and type of services provided. For example, the costs per patient-day of geriatric and convalescent care are lower than the costs of acute or short-term care. Consequently, in those provinces where a relatively small proportion of the care provided in budget review hospitals is convalescent or geriatric, the average operating costs per patient-day of these hospitals tend to be relatively high. Conversely, in such provinces, because of the exclusion of most geriatric and convalescent care from budget review hospitals, their total and per capita operating costs are lower.

(1) Non-departmental expenses include mainly items such as interest, depreciation, and rent, that do not relate to particular departments of the hospital.

TABLE 16

REVENUE FUND EXPENDITURES OF ALL BUDGET REVIEW HOSPITALS PER CAPITA⁽¹⁾,
BY PROVINCE, 1959 - 1964⁽²⁾,

PROVINCE	1959	1960	1961	1962	1963	1964
	\$	\$	\$	\$	\$	\$
Newfoundland	18.57	21.06	22.93	25.89	28.84	33.63
Prince Edward Island	-	25.00	30.55	31.54	33.57	37.16
Nova Scotia	25.87	30.47	33.80	36.67	40.17	45.09
New Brunswick	-	35.38	39.70	42.97	47.23	50.60
Quebec	-	-	34.59	39.55	45.20	51.30
Ontario	32.90	37.68	41.51	46.13	50.56	55.07
Manitoba	32.55	35.72	38.78	41.70	45.17	47.18
Saskatchewan	41.12	42.32	43.30	45.39	49.33	53.87
Alberta	34.57	36.45	38.79	42.30	46.09	50.55
British Columbia	33.41	37.21	39.61	41.64	43.66	45.38
Yukon	-	-	11.33	12.05	11.67	9.74
Northwest Territories	-	-	10.62	10.61	11.48	10.80
CANADA	32.68 ⁽³⁾	36.48 ⁽⁴⁾	38.14	42.13	46.47	51.04

(1) Based on intercensal estimates as at June 1, and 1961 Census of population, Dominion Bureau of Statistics.

(2) Note that figures for 1960 and 1964 and trends involving these years will be altered by the extra day in them.

(3) Based on population of seven provinces.

(4) Based on population of nine provinces.

Source: Table A19 and previous Annual Reports.

4. Patient Characteristics

Data on characteristics of patients are reported to the provinces by the hospitals on admission-separation forms. The provinces prepare tables from their reports and supply them to the Department of National Health and Welfare.

There are some differences⁽¹⁾ among the provinces in the reporting of some categories of separations and patient-days; however, these differences are relatively minor and do not invalidate the information in the tables.

a) Age

Increasing age brings much more frequent hospital care and much longer periods of stay in hospital, and during the early 1960's the contrast was increasing (Table 17). Of every thousand Canadian children aged 5-14 just over 80 were in hospital each year from 1961 to 1964, and they stayed about six days. On the other hand, 254 in each thousand aged 65 and over went to hospital in 1961 and rather more, 290, in 1964, and they stayed there 25 days, on the average, in 1961 and somewhat longer, 29 days, in 1964. This upward trend in the hospital utilization rates of aged persons in Canada may reflect the increases in the number of chronic and convalescent care facilities available and in the occupancy of these facilities.

In general during the early 1960's the older the age group, the greater the tendency to be experiencing increased average lengths of stay. Table 17 sets out the statistics, which illustrate clearly the dual and roughly parallel pattern of advancing age being marked by increased frequency of hospitalization, as measured by separations per thousand population, and by increased lengths of treatment, as measured by average stay of separations.

b) Age and Sex

Table 18 shows separations, patient-days, and average stay by age and sex, in 1964. Of all separations, 1,865,000 or 60.3 per cent were female. Of the females, 1,050,000 or 56.3 per cent were in the 15-44-year childbearing age group, but only 339,000

(1) In some provinces only insured hospitalization data are reported; in other provinces data for non-insured hospitalization are also included. Also, for some provinces, the out-of-province insured hospitalization data are reported by the province that paid the costs of hospitalization as well as by the province where the actual hospitalization took place.

TABLE 17

SEPARATIONS PER THOUSAND POPULATION, PATIENT-DAYS OF SEPARATIONS PER THOUSAND POPULATION, AND AVERAGE STAY OF SEPARATIONS, BY AGE GROUP, ADULTS AND CHILDREN, CANADA, 1961 - 1964 (1)

	0-4 ⁽²⁾	5-14	15-24	25-44	45-64	65+	Age Unknown	Total
SEPARATIONS PER THOUSAND POPULATION								
1961	150.9	83.1	165.2	169.4	143.8	254.0	-	150.0
1962	155.8	82.5	172.2	178.3	152.8	269.2	-	156.4
1963	155.8	81.5	167.2	176.6	155.6	277.2	-	156.0
1964	163.0	83.9	167.3	180.9	163.0	289.9	-	160.9
DAYS SINCE ADMISSION PER THOUSAND POPULATION								
1961	1,218.9	497.5	1,106.1	1,380.5	2,100.0	6,317.6	-	1,633.3
1962	1,319.7	501.2	1,168.8	1,508.8	2,332.2	7,430.8	-	1,813.5
1963	1,291.2	485.4	1,130.7	1,487.9	2,379.6	7,726.8	-	1,824.8
1964	1,350.9	501.8	1,140.5	1,563.6	2,537.4	8,410.9	-	1,937.5
AVERAGE STAY OF SEPARATIONS								
1961	8.1	6.0	6.7	8.2	14.6	24.9	10.8	10.9
1962	8.5	6.1	6.8	8.5	15.3	27.6	11.9	11.6
1963	8.3	6.0	6.8	8.4	15.3	27.9	9.7	11.7
1964	8.3	6.0	6.8	8.6	15.6	29.0	11.2	12.0

(1) Note that figures for 1964 will be altered by the extra day in that year.

(2) Excludes newborns.

Source: Data supplied to Department of National Health and Welfare by Provincial Plans.

TABLE 18

HOSPITALIZATION BY AGE AND SEX FOR ADULT AND CHILD IN-PATIENTS INSURED BY PROVINCIAL PLANS, CANADA 1964

	0-4(1)	5-14	15-24	25-44	45-59	60-64	65-74	75+	Age Unknown	Total
SEPARATIONS										
Male	213,352	187,838	118,868	219,859	201,041	67,556	119,109	99,759	1,254	1,228,636
Female	158,971	163,197	383,640	666,215	225,184	59,752	110,754	95,858	1,754	1,865,325
Total	372,323	351,035	502,508	886,074	426,225	127,308	229,863	195,617	3,008	3,093,961
SEPARATIONS PER 1,000 POPULATION										
Male	182.7	87.7	78.2	89.5	143.4	216.6	271.7	384.6	-	126.7
Female	142.5	79.8	258.8	272.9	164.2	192.2	234.4	322.2	-	195.6
Total	163.0	83.9	167.3	180.9	153.7	204.4	252.3	351.3	-	160.9
PATIENT-DAYS SINCE ADMISSION										
Male	1,751,813	1,146,422	984,618	2,372,758	2,971,859	1,237,170	2,622,627	3,082,537	14,194	16,183,998
Female	1,333,159	953,894	2,440,633	5,286,594	3,275,442	1,133,698	2,696,165	3,945,081	19,413	21,084,079
Total	3,084,972	2,100,316	3,425,251	7,659,352	6,247,301	2,370,868	5,318,792	7,027,618	33,607	37,268,077
DAYS SINCE ADMISSION PER 1,000 POPULATION										
Male	1,500.0	535.5	647.3	965.7	2,119.6	3,966.6	5,982.3	11,883.3	-	1,668.7
Female	1,194.9	466.5	1,646.5	2,165.3	2,388.2	3,646.5	5,705.0	13,260.8	-	2,210.9
Total	1,350.9	501.8	1,140.5	1,563.6	2,252.4	3,806.8	5,838.4	12,619.2	-	1,937.5
AVERAGE STAY OF SEPARATION										
Male	8.2	6.1	8.3	10.8	14.8	18.3	22.0	30.9	11.3	13.2
Female	8.4	5.8	6.4	7.9	14.5	19.0	24.3	41.2	11.1	11.3
Total	8.3	6.0	6.8	8.6	14.7	18.6	23.1	35.9	11.2	12.0
POPULATION (In Thousands)										
Male	1,167.9	2,140.7	1,521.0	2,457.0	1,402.1	311.9	438.4	259.4	-	9,698.4
Female	1,115.7	2,044.6	1,482.3	2,441.5	1,371.5	310.9	472.6	297.5	-	9,536.6
Total	2,283.6	4,185.3	3,003.3	4,898.5	2,773.6	622.8	911.0	556.9	-	19,235.0

(1) Excludes newborns.

Source: Data supplied to Department of National Health and Welfare by Provincial Plans.

or 27.6 per cent of male patients were in the corresponding age group. Females also outnumbered males among separations age 45-59, whereas below age 15 and above age 59 there were more males than females.

The average length of stay per separation for all age-groups was almost two days longer for males than for females, 13.2 days as against 11.3. Most of the difference in length of stay between male and female separations may be traced to the 15-44 (childbearing) age-group, where the length of stay of female separations is considerably shorter than the length of stay of male separations. (The average stay in normal delivery cases is 5.8 days.) Below age 5 and above age 59 the length of stay of separations for females is longer than for males.

c) Hospital Morbidity

Of the entire Canadian List of 98 Diagnoses (Table 19 and A21⁽¹⁾) the three leading diagnoses, delivery without mention of complications, hypertrophy of tonsils and adenoids, and arteriosclerotic and degenerative heart disease, accounted for 23.2 per cent of separations in 1964.

Although the first ten leading diagnoses were responsible for 39.0 per cent of separations in 1964, those separations accounted for only 26.9 per cent of patient-days in that year; this is due in part to the short periods of stay in hospital of separations diagnosed as "delivery without mention of complications", which alone accounted for 13.3 per cent of separations but for only 6.5 per cent of patient-days (Tables 19 and A21).

The broad grouping in which such deliveries were included, "XI. Deliveries and Complications of Pregnancy, Childbirth, and the Puerperium", accounted for the largest percentage of separated cases (19.4 among the seventeen main diagnostic groupings given in Table A21. This group, however, required only 9.2 per cent of all the days of care, being exceeded in this regard by circulatory disorders (group VII, 14.7 per cent), digestive disorders (group IX, 11.6 per cent), and nervous-system-and-sense-organ diseases (group VI, 11.1 per cent).

(1) Excluded from the table are four specific categories grouped as Supplementary Classifications for Special Admissions, Live Births and Stillbirths (95. Medical or Special Examination (without sickness); 96. Mature Liveborn; 97. Immature Newborn; 98. Other Special Admissions, Examinations, etc.)

TABLE 19

TEN LEADING CAUSES OF HOSPITAL SEPARATIONS BY DIAGNOSIS: NUMBER, RANK AND PERCENTAGE DISTRIBUTION, CANADA, (1) 1961 - 1964

Canadian List Number	Diagnosis	1964			1963			1962			1961		
		No.	Rank	%	No.	Rank	%	No.	Rank	%	No.	Rank	%
75	Delivery without mention of complications	409,564 ¹	1	13.3	413,213	1	14.1	385,812	1	14.1	338,271	1	15.3
50	Hypertrophy of tonsils and adenoids	200,408	2	6.5	196,834	2	6.7	174,693	2	6.4	161,739	2	7.3
38	Arteriosclerotic and degenerative heart disease	102,810	3	3.3	93,449	4	3.2	82,867	4	3.0	69,535	3	3.1
48	Pneumonia	99,619	4	3.2	99,457	3	3.4	83,006	3	3.0	64,229	4	2.9
73	Complications of pregnancy	80,821	5	2.6	79,180	5	2.7	70,792	5	2.6	59,148	5	2.7
61	Diseases of gallbladder and pancreas	71,727	6	2.3	63,983	6	2.2	55,303	7	2.0	46,083	9	2.1
56	Hernia of abdominal cavity	65,801	7	2.1	61,992	7	2.1	56,157	6	2.1	47,225	7	2.1
49	Bronchitis	58,256	8	1.9	54,819	9	1.9	49,384	10	1.8	35,661	10	1.6
55	Appendicitis	54,600	9	1.8	54,086	10	1.8	50,382	9	1.8	48,224	6	2.2
74	Abortion	54,449	10	1.8	55,696	8	1.9	52,812	8	1.9	46,377	8	2.1
	Other diagnoses	1,876,012	-	61.0	1,756,890	-	60.0	1,672,208	-	61.2	1,301,166	-	58.7
	All Diagnoses (1-94)	3,074,067	-	100.0	2,929,599	-	100.0	2,733,416	-	100.0	2,217,658	-	100.0

(1) In 1964 and 1963, the data were complete; in 1962, the data excluded Newfoundland and Nova Scotia and New Brunswick; and in 1961, the data excluded Newfoundland, New Brunswick, Manitoba and Alberta. Despite the differences from year to year in the number of separations for each diagnosis, the rank order remained relatively the same in each of the four years.

(2) This figure has been estimated to offset a coding variation that occurred in Ontario.

SOURCE: Data supplied to Department of National Health and Welfare by Provincial Plans.

The group "VIII. Diseases of the Respiratory System" ranks next, in regard to number of separations, with 15.4 per cent. With their average length of stay of 6.6 days, patients with respiratory ailments received 8.4 per cent of the days of care. The most frequent diagnosis in this group was "50. Hypertrophy of tonsils and adenoids", which alone accounted for 6.5 per cent of separations. "48. Pneumonia" took second place with 3.2 per cent of separations.

The next-ranked group, in terms of number of separations, is "IX. Diseases of the Digestive System", which includes such conditions as appendicitis, duodenal ulcer, hernia of the abdominal cavity, and diseases of the gallbladder and pancreas. Group IX accounted for 13.5 per cent of separations and 11.6 per cent of days of care. Among the major specific diagnoses in this group was "61. Diseases of the gallbladder and pancreas" which alone is the sixth leading cause of all hospital separations (Table 19). Furthermore, still in the same group, "56. Hernia of abdominal cavity" takes the seventh place and "55. Appendicitis" takes the ninth position (Table 19).

The group "XVII. Accidents, Poisonings, and Violence" contributed 8.8 per cent of separations and 8.6 per cent of the days of care. The specific category "89. Fracture of femur" had the longest average length of stay of any diagnostic category -- 51.3 days.

A number of other diagnostic categories in the major groupings required long average length of stay. Among these were "VI. Diseases of Nervous System and Sense Organs" with 27.6 days average stay of separations, "VII. Diseases of the Circulatory System" with 22.2 days average stay, "II. Neoplasms" with 19.2 days average stay, and "III. Allergic, Endocrine System, Metabolic and Nutritional Diseases" with 16.2 days average stay. These data, and those for certain diagnostic categories outlined in detail in Table A21, demonstrate that long-term diseases such as heart disease, cancer, and diseases of the nervous system have their major impact on the volume of hospital care not so much because of their frequency but because of the relatively long periods of hospital treatment that they require.

5. Hospital Personnel

Increasing population, higher total and per capita utilization of hospital facilities, improvement in the quality of hospital services, and amelioration of employment conditions in hospitals are the major factors responsible for the steady increase in the number of hospital employees over the last few years. Table 20 shows that the total number of persons employed full-time in hospitals listed in hospital insurance agreements

TABLE 20

NUMBER OF PERSONS EMPLOYED FULL-TIME AND PART-TIME IN HOSPITALS LISTED IN HOSPITAL INSURANCE AGREEMENTS, BY PROVINCE, AS AT DECEMBER 31, 1961, 1962, 1963, AND 1964.

PROVINCE	Number of Hospitals Reporting				Full-Time				Part-Time			
	1961	1962	1963	1964 ⁽¹⁾	1961	1962	1963	1964	1961	1962	1963	1964
Newfoundland	42	43	45	46	3,004	3,129	3,494	4,473	146	104	332	209
Prince Edward Island	9	9	9	9	908	931	938	945	72	47	69	74
Nova Scotia	48	48	48	48	7,452	7,531	7,954	8,245	516	792	606	607
New Brunswick	40	39	40	42	6,715	6,893	7,374	7,552	530	389	397	591
Quebec	243	262	268	269	51,503	56,169	60,370	64,870	4,812	4,911	4,819	5,135
Ontario	325	321	318	319	66,466	70,205	73,835	77,015	9,172	10,537	11,134	12,430
Manitoba	100	101	103	104	10,053	10,604	11,096	11,294	1,431	1,410	1,653	1,685
Saskatchewan	160	160	159	156	10,310	10,389	10,751	11,072	709	734	989	1,189
Alberta	122	126	132	137	13,982	14,635	15,538	16,381	954	1,095	1,260	1,569
British Columbia	111	111	111	111	15,298	15,534	15,938	16,410	1,753	1,572	1,709	1,916
Yukon	3	3	3	5	139	158	147	153	36	64	33	9
Northwest Territories	22	19	25	26	242	189	343	362	22	83	43	91
CANADA	1,225	1,242	1,261	1,272	186,072	196,367	207,778	218,772	20,153	21,738	23,044	25,505

(1) 18 hospitals not reporting.

Source: Table A22 and previous Annual Reports.

increased by 5.3 per cent from 207,778 in 1963 to 218,772 in 1964 and the number of part-time employees increased by 10.7 per cent, rising from 23,044 in 1963 to 25,505 in 1964. The corresponding percentage increase between 1962 and 1963 had been 5.8 per cent for full-time and 6.0 per cent for part-time employees. Among the provinces, the increase in the number of full-time hospital personnel in 1964 ranged from 28.0 per cent in Newfoundland to 0.7 per cent in Prince Edward Island. The increases in Quebec and Ontario were 7.5 per cent and 4.3 per cent respectively, and together, these two provinces accounted for 69.9 per cent of the total national increase in the number of full-time employees.

Of the total full-time and part-time personnel employed in 1964 in hospitals listed in hospital insurance agreements, 13.7 per cent were classified as "trainees" and 86.3 per cent as "employees" (Table 21). The 13.7 per cent of personnel who were in training comprised: doctors, 1.8 per cent; nurses and nursing assistants, 11.0 per cent; and other professional and technical personnel, 0.9 per cent. The 86.3 per cent in the employee category comprised: medical staff, 1.7 per cent; nursing staff, 43.4 per cent; other professional and technical staff, 5.9 per cent; and other personnel, 35.3 per cent.

The total number of hospital personnel employed in hospitals listed in hospital insurance agreements in 1964, including staff in training, was 1,203.7 per 100,000 population in Canada (Table A24). Provincially, this ratio varied from 917.8 in Prince Edward Island to 1,272.0 in New Brunswick. In New Brunswick, Quebec, Ontario, Manitoba, and Saskatchewan, the ratios were above the national average.

Table A23 shows the percentage distribution in each province and territory of all hospital personnel in hospitals listed in hospital insurance agreements according to type of occupation in 1964. Doctors accounted for 2.5 per cent of hospital employees in Newfoundland, 2.2 per cent in Quebec, and 2.0 per cent in Manitoba. Of employees in Alberta, 0.9 per cent were doctors, and in Saskatchewan, 0.8 per cent were doctors. Nursing staff as a percentage of the total number of employees varied from 35.7 in Newfoundland and 37.7 in Prince Edward Island to 46.5 in Ontario and 46.8 in Alberta. Other professional and technical staff was lowest in New Brunswick at 4.7 per cent and highest in Saskatchewan at 6.9 per cent. The proportion of trainees among total personnel varied from 11.3 per cent in British Columbia and 11.7 in Ontario to 17.0 in Nova Scotia, 17.9 in Newfoundland, and 19.4 per cent in Prince Edward Island.

TABLE 21
DISTRIBUTION OF PERSONNEL IN HOSPITALS LISTED IN HOSPITAL INSURANCE AGREEMENTS,
BY TYPE OF PERSONNEL, CANADA, 1964

Category	Full-Time	Part-Time	Total	Percentage of Total Personnel
Employees				
A. Medical	1,529	2,518	4,047	1.7
B. Nursing				
Graduate Nurses	43,592	8,872	52,464	21.5
Qualified Nursing Assistants	16,574	1,319	17,893	7.3
Orderlies	8,924	316	9,240	3.8
Other	23,719	2,712	26,431	10.8
TOTAL	92,809	13,219	106,028	43.4
C. Other Professional and Technical				
Hospital Administrators	1,286	136	1,422	0.6
Dietitians	904	113	1,017	0.4
Medical Record Librarians	882	94	976	0.4
Laboratory Technicians	4,639	382	5,021	2.1
Radiological Technicians				
Combined Laboratory and	2,419	145	2,564	1.0
Radiological Technicians	401	56	457	0.2
Physiotherapists	1,011	171	1,182	0.5
Occupational Therapists	295	38	333	0.1
Pharmacists	715	185	900	0.4
Psychologists	93	46	139	0.1
Social Workers	400	66	466	0.2
TOTAL	13,045	1,432	14,477	5.9
D. Other Personnel	77,976	8,204	86,180	35.3
TOTAL EMPLOYEES	185,359	25,373	210,732	86.3
Trainees				
A. Medical				
Residents and Senior Interns	3,094	47	3,141	1.3
Junior Interns	1,188	85	1,273	0.5
TOTAL	4,282	132	4,414	1.8
B. Nursing				
Student Nurses	23,127	xx	23,127	9.5
Nursing Assistants	3,721	xx	3,721	1.5
TOTAL	26,848	xx	26,848	11.0
C. Other Professional and Technical				
Medical Record Librarians	95	xx	95	*
Laboratory Technicians	1,103	xx	1,103	0.5
Radiological Technicians	1,085	xx	1,085	0.4
TOTAL	2,283	xx	2,283	0.9
TOTAL TRAINEES	33,413	132	33,545	13.7
TOTAL PERSONNEL	218,772	25,505	244,277	100.0

* Less than 0.05.

xx Not applicable.

Source: Table A22

Statistics in Table 22 show that the total number of paid hours of work per patient-day in budget review general hospitals increased between 1961 and 1964 by 7.4 per cent, rising from 12.65 hours in 1961 to 13.59 hours in 1964. This increase can be traced almost completely to the increase in the number of hours worked in the nursing departments, where the hour-day ratio rose by 13.3 per cent from 6.69 in 1961 to 7.58 in 1964. The number of paid hours per patient-day has increased as a result of advances in medical science, the multiplication of special facilities, and the growing complexity of hospital services; all of these factors have contributed to the rise in the quantity of professional, technical and supportive services rendered in relation to the care of each patient.

Among the provinces, the total number of paid hours of work per patient-day in budget review general hospitals (Table A25) ranged from 15.25 in Quebec to 11.72 in British Columbia. In only three provinces, Nova Scotia, New Brunswick, and Quebec, was the hour-day ratio in these hospitals higher than the national average.

TABLE 22

PAID HOURS OF WORK, TOTAL AND PER PATIENT-DAY,
IN BUDGET REVIEW GENERAL HOSPITALS,
CANADA, 1961, 1962, 1963, AND 1964⁽¹⁾

Year	Total	Nursing Personnel	Other Personnel
TOTAL			
1961.....	328,165,256	173,553,050	154,612,206
1962.....	352,796,076	192,910,088	159,885,988
1963.....	372,316,575	207,648,065	164,668,510
1964.....	396,390,105	221,053,077	175,337,028
PER PATIENT-DAY			
1961.....	12.65	6.69	5.96
1962.....	12.95	7.08	5.87
1963.....	13.17	7.35	5.83
1964.....	13.59	7.58	6.01

(1) Note that figures for 1964 will be altered by the extra day in that year.

Source: Table A25 and previous Annual Reports.

APPENDIX TABLES

TABLE A1

TOTAL PATIENT-DAYS DURING YEAR, ADULTS AND CHILDREN, IN REPORTING HOSPITALS LISTED IN HOSPITAL INSURANCE AGREEMENTS, NUMBER AND PERCENTAGE DISTRIBUTION BY RESPONSIBILITY FOR PAYMENT, BY PROVINCE, 1964

PROVINCE	(a) Number of Patient-days by Responsibility for Payment							Number of Hospitals Reporting
	Provincial Plan	Insured Residents Not Responsible of Province	Uninsured Residents of Province	Non-Residents of Province	Workmen's Compensation Boards	Federal Government	Undistributed Patient-days (1)	
Newfoundland	647,959	22,475	-	2,892	11,861	11,243	-	696,430 47(2)
Prince Edward Island	166,190	529	-	3,223	2,042	3,587	-	175,571 9
Nova Scotia	1,173,051	1,004	1,195	25,016	18,456	82,768	-	1,301,490 48
New Brunswick	1,066,984	61	968	39,232	23,215	74,178	-	1,204,638 42
Quebec	9,702,623	2,847	4,335	101,787	137,130	433,820	-	10,382,542 269
Ontario	12,542,986	131,857	165,534	210,496	245,125	544,940	125,226	13,966,164 319
Manitoba(3)	1,794,648	1,260	1,723	65,018	22,261	123,994	-	2,008,904 104
Saskatchewan	2,135,453	609	12,730	36,890	19,595	45,298	-	2,250,575 157
Alberta	3,140,045	17,477	658	61,741	57,580	105,160	-	3,382,661 161(4)
British Columbia	2,850,357	16,971	5,493	41,556	81,956	417,770	-	3,414,103 111
Yukon	18,334	370	503	1,800	985	528	-	22,520 5
Northwest Territories	41,676	15	10	3,216	999	21,928	-	67,844 26
CANADA	35,280,306	195,475	193,149	592,867	621,205	1,865,214	125,226	38,873,442 1,298

TABLE A1 (cont'd)

Province	(b) Percentage Distribution of Patient-days by Responsibility for Payment								Number of Hospitals Reporting
	Provincial Plan	Insured Residents Care Not Responsibility of Provincial Plan	Uninsured Residents of Province	Non-Residents of Province	Workmen's Compensation Boards	Federal Government	Undistributed Patient-days (1)	Total Patient-days	
Newfoundland	93.0	3.2	-	0.4	1.7	1.6	-	100.0	47
Prince Edward Island	94.7	0.3	-	1.8	1.2	2.0	-	100.0	9
Nova Scotia	90.1	0.1	0.1	1.9	1.4	6.4	-	100.0	48
New Brunswick	88.6	*	0.1	3.3	1.9	6.2	-	100.0	42
Quebec	93.5	*	*	1.0	1.3	4.2	-	100.0	269
Ontario	89.8	0.9	1.2	1.5	1.8	3.9	0.9	100.0	319
Manitoba	89.3	0.1	0.1	3.2	1.1	6.2	-	100.0	104
Saskatchewan	94.9	*	0.6	1.6	0.9	2.0	-	100.0	157
Alberta	92.8	0.5	*	1.8	1.7	3.1	-	100.0	161
British Columbia	83.5	0.5	0.2	1.2	2.4	12.2	-	100.0	111
Yukon	81.4	1.6	2.2	8.0	4.4	2.3	-	100.0	5
Northwest Territories	61.4	*	*	4.7	1.5	32.3	-	100.0	26
CANADA	90.8	0.5	0.5	1.5	1.6	4.8	0.3	100.0	1,298

* Less than 0.5%.

(1) Not all hospitals available for distribution of patient-days by responsibility for payment. (2) Included one hospital that closed during 1964.

(3) Includes patient-days of 8,561 "provincial plan" patient-days and 119,233 "federal government" patient-days in Deer Lodge Veterans Hospital.

(4) Includes 23 NursingHomes which were deleted at the end of 1964 (168,413 patient-days, responsibility of Provincial Plan).

TABLE A2

TOTAL PATIENT-DAYS DURING YEAR, ADULTS AND CHILDREN, IN HOSPITALS LISTED IN HOSPITAL INSURANCE AGREEMENTS,
NUMBER AND PERCENTAGE DISTRIBUTION AND TOTAL RATES PER THOUSAND POPULATION, BY STATUS
OF HOSPITAL AND BY PROVINCE, 1964

PROVINCE	Number				Total Per Thousand Population	Per Cent				Number of Hospitals Reporting
	All Budget Review	Contract	Federal	Total		All Budget Review	Contract	Federal	Total	
Newfoundland	649,678	43,015	3,737	696,430	1,418.4	93.3	6.2	0.5	100.0	47
Prince Edward Island	175,571	-	-	175,571	1,640.8	100.0	-	-	100.0	9
Nova Scotia	1,167,246	-	134,244	1,301,490	1,712.5	89.7	-	10.3	100.0	48
New Brunswick	1,090,044	-	114,594	1,204,638	1,952.4	90.5	-	9.5	100.0	42
Quebec	8,828,700	930,703	623,139	10,382,542	1,866.7	85.0	9.0	6.0	100.0	269
Ontario	12,161,586	815,707	988,871	13,966,164	2,120.6	87.1	5.8	7.1	100.0	319
Manitoba	1,774,371	23,446	211,087	2,008,904	2,097.0	88.3	1.2	10.5	100.0	104
Saskatchewan	2,204,500	3,805	42,270	2,250,575	2,386.6	98.0	0.2	1.9	100.0	157
Alberta	2,960,127	175,098	247,436	3,382,661	2,362.2	87.5	5.2	7.3	100.0	161
British Columbia	2,819,401	12,152	582,550	3,414,103	1,964.4	82.6	0.4	17.1	100.0	111
Yukon	3,102	-	19,418	22,520	1,407.5	13.8	-	86.2	100.0	5
Northwest Territories	7,974	31,101	28,769	67,844	2,713.8	11.8	45.8	42.4	100.0	26
CANADA	33,842,300	2,035,027	2,996,115	38,873,442	2,021.0	87.1	5.2	7.7	100.0	1,298

TABLE A3

TOTAL PATIENT-DAYS DURING YEAR, ADULTS AND CHILDREN, IN ALL BUDGET REVIEW HOSPITALS,
NUMBER AND PERCENTAGE DISTRIBUTION, BY TYPE OF ACCOMMODATION, BY PROVINCE, 1964

PROVINCE	Number		Per Cent		Total Patient-days During Year
	Standard Ward	Private and Semi-Private Rooms	Standard Ward	Private and Semi-Private Rooms	
Newfoundland	582,839	66,839	89.7	10.3	649,678
Prince Edward Island	137,204	38,367	78.1	21.9	175,571
Nova Scotia	829,041	338,205	71.0	29.0	1,167,246
New Brunswick	710,788	379,256	65.2	34.8	1,090,044
Quebec	5,178,076	3,650,624	58.7	41.3	8,828,700
Ontario	7,326,606	4,834,980	60.2	39.8	12,161,586
Manitoba	1,457,165	317,206	82.1	17.9	1,774,371
Saskatchewan	1,939,777	264,723	88.0	12.0	2,204,500
Alberta	2,506,440	453,687	84.7	15.3	2,960,127
British Columbia	2,256,206	563,195	80.0	20.0	2,819,401
Yukon	3,102	-	100.0	-	3,102
Northern Territories	7,974	-	100.0	-	7,974
CANADA	22,935,218	10,707,082	67.8	32.2	33,842,300

TABLE A4

TOTAL SEPARATIONS, ADULTS AND CHILDREN, IN HOSPITALS LISTED IN HOSPITAL INSURANCE AGREEMENTS, NUMBER AND RATES PER THOUSAND POPULATION, BY PROVINCE, 1961 - 1964 (1)

PROVINCE	Separations During Year				Separations Per Thousand Population				Number of Hospitals Reporting			
	1961	1962	1963	1964	1961	1962	1963	1964	1961	1962	1963	1964
Newfoundland	50,869	54,629	56,292	58,645	111.1	116.2	117.0	119.4	42	43	46	47
Prince Edward Island	16,202	16,934	17,079	17,334	154.8	159.8	159.6	162.0	9	9	9	9
Nova Scotia	109,273	110,115	110,889	114,019	148.3	147.6	146.7	150.0	48	48	48	48
New Brunswick	104,232	104,571	105,861	108,260	174.3	172.3	172.4	175.5	40	40	40	42
Quebec	722,909	745,891	771,052	788,029	137.4	139.0	141.0	141.7	275	275	271	269
Ontario	949,027	969,272	1,007,587	1,038,416	152.2	152.8	156.3	157.7	236	327	321	319
Manitoba	165,244	170,407	175,525	176,138	179.3	182.3	184.8	183.9	100	100	100	104
Saskatchewan	199,236	195,951	210,958	211,481	215.3	210.7	226.1	224.3	160	160	160	157
Alberta(2)	261,244	268,690	273,509	283,387	196.1	196.1	194.7	197.9	122	126	132	138
British Columbia	285,744	291,650	300,939	307,080	175.4	175.8	177.5	176.7	108	109	111	111
Yukon	3,458	3,671	3,297	2,931	236.4	244.7	219.8	183.2	3	4	5	5
Northwest Territories	4,548	5,965	6,775	6,572	197.8	248.5	282.3	262.9	22	20	25	26
CANADA	2,871,986	2,937,746	3,039,763	3,112,292	157.5	158.2	160.9	161.9	1,255	1,252	1,271	1,275

(1) Note that figures for 1964 and trends involving 1964 will be altered by the extra day in that year.

(2) Excludes 23 Nursing Homes.

TABLE A5

AVERAGE LENGTH OF STAY (IN DAYS), ADULTS AND CHILDREN, IN HOSPITALS LISTED IN HOSPITAL INSURANCE AGREEMENTS,
BY STATUS OF HOSPITAL AND BY PROVINCE, 1964

PROVINCE	(a) Patient-days Since Admission Divided by Separations						
	Budget Review General	Budget Review Chronic and Convalescent	Other Budget Review Special	All Budget Review	Contract	Federal	All Hospitals
Newfoundland	13.4	—	—	13.4	17.2	5.6	13.5
Prince Edward Island	9.5	—	63.8	9.8	—	—	9.8
Nova Scotia	10.6	38.6	7.6	10.6	—	30.6	11.3
New Brunswick	9.9	43.2	8.5	10.3	—	33.7	10.9
Quebec	10.3	122.5	9.8	12.1	15.2	47.4	12.8
Ontario	10.8	184.3	22.7	12.3	20.3	54.4	13.5
Manitoba	9.1	101.3	48.3	10.8	6.8	21.3	11.4
Saskatchewan	9.5	252.0	—	10.4	6.4	16.8	10.4
Alberta	8.9	238.2	5.3	10.7	6.9	35.5	11.3
British Columbia	9.4	—	47.4	9.6	4.3	45.5	11.0
Yukon	6.6	—	—	6.6	—	8.7	8.3
Northwest Territories	8.1	—	—	8.1	11.6	11.3	10.9
CANADA	10.2	147.5	14.4	11.5	16.2	39.6	12.4

TABLE A5 (Cont'd)

PROVINCE	(b) Patient-days During Year Divided by Separations						
	Budget Review General	Budget Review Chronic and Convalescent	Other Budget Review Special	All Budget Review	Contract	Federal	All Hospitals
Newfoundland	11.7	-	-	11.7	18.4	5.4	11.9
Prince Edward Island	9.7	-	97.0	10.1	-	-	10.1
Nova Scotia	10.6	38.2	7.7	10.6	-	34.2	11.4
New Brunswick	9.9	46.5	8.7	10.4	-	38.0	11.1
Quebec	10.4	122.5	9.8	12.1	19.7	51.1	13.2
Ontario	10.9	184.3	22.8	12.4	23.9	42.6	13.4
Manitoba	9.1	110.9	47.9	11.0	6.8	19.7	11.4
Saskatchewan	9.5	292.9	-	10.6	6.3	19.3	10.6
Alberta	8.9	252.6	5.4	10.8	7.0	33.4	11.3
British Columbia	9.4	-	49.1	9.7	4.3	47.3	11.1
Yukon	6.6	-	-	6.6	-	7.9	7.7
Northwest Territories	7.7	-	-	7.7	11.1	10.5	10.3
CANADA	10.2	150.8	14.6	11.5	19.8	37.1	12.4

TABLE A6
PERCENTAGE DISTRIBUTION OF PATIENT-DAYS OF SEPARATIONS, BY LENGTH-OF-STAY GROUPINGS,
BOTH SEXES AND ALL AGES, PROVINCIAL PLAN IN-PATIENTS, BY PROVINCE, 1964 (1)

Length of Stay (in Days)	Newfound- land	Prince Edward Island	Nova Scotia	New Brun- swick	Quebec	Ontario	Manitoba	Saskat- chewan	Alberta	British Columbia	Yukon	Northwest Territories	CANADA
1	0.5	0.7			0.7	0.7	0.7	0.8	0.6	0.6	1.0	0.9	0.7
2	1.5	1.6			1.1	1.6	2.5	2.7	1.9	2.9	3.1	2.0	1.7
3	2.9	2.5			1.5	1.7	2.3	2.8	2.0	2.6	3.4	3.1	1.9
4 - 6	11.7	14.5			10.8	9.9	12.4	13.8	9.0	12.4	19.4	15.7	10.7
7 - 10	12.4	17.3			13.1	11.9	13.4	16.0	11.2	16.6	18.5	21.6	12.9
11 - 14	10.2	11.6			11.2	8.9	9.7	11.4	7.1	11.3	13.2	13.6	9.7
15 - 29	23.9	22.7			24.8	19.3	20.2	22.9	13.3	23.3	19.0	20.6	20.8
30 - 59	18.4	15.1			14.6	16.0	15.7	15.6	9.4	17.4	11.3	13.0	14.9
60 -	18.5	14.1			22.3	30.0	23.1	14.0	45.5	12.7	11.0	9.4	26.6
TOTAL	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0

(1) Excludes Nova Scotia and New Brunswick.

TABLE A7
AVERAGE LENGTH OF STAY (IN DAYS) (1) ADULTS AND CHILDREN IN BUDGET REVIEW GENERAL HOSPITALS, BY BED-SIZE OF HOSPITAL AND BY PROVINCE, 1964

PROVINCE	Number of Hospitals Reporting	Bed-size of Hospital (Rated Bed Capacity)								1,000 and over	Total
		1-9	10-24	25-49	50-99	100-199	200-299	300-499	500-999		
Newfoundland	23	5.6	6.2	9.9	14.5	11.7	11.6	7.6	25.5	-	13.4
Prince Edward Island	8	-	7.5	7.6	7.3	9.7	11.2	-	-	-	9.5
Nova Scotia	44	10.0	8.1	8.7	9.9	10.0	12.2	10.1	14.2	-	10.6
New Brunswick	36	7.1	8.2	7.2	8.4	9.5	9.6	12.2	15.5	-	9.9
Quebec	128	9.9	8.0	7.5	8.2	8.8	10.2	10.6	12.5	13.3	10.3
Ontario	190	6.4	7.2	9.4	10.0	9.4	10.3	11.1	11.3	14.2	10.8
Manitoba	76	7.9	7.2	7.2	7.8	9.8	8.5	9.7	11.7	-	9.1
Saskatchewan	149	7.4	7.2	7.6	8.6	10.1	14.4	11.4	13.0	-	9.5
Alberta	106	5.1	7.1	6.7	8.0	8.4	11.7	9.3	10.1	14.4	8.9
British Columbia	86	-	7.4	7.4	7.8	8.3	8.7	10.9	11.5	13.5	9.4
Yukon	2	-	6.6	-	-	-	-	-	-	-	6.6
Northwest Territories	1	-	-	8.1	-	-	-	-	-	-	8.1
CANADA	849	7.2	7.3	7.7	8.7	9.1	10.2	10.8	12.0	13.9	10.2

(1) Patient-days since admission divided by separations.

TABLE A8

NUMBER OF HOSPITALS AND OTHER FACILITIES AND PERCENTAGE DISTRIBUTION OF HOSPITALS LISTED IN HOSPITAL INSURANCE AGREEMENTS, BY STATUS OF HOSPITAL, BY PROVINCE, DECEMBER 31, 1964

PROVINCE	Number of Hospitals (1)			Percentage of Hospitals			Number of other Facilities (2)	Total Number of Facilities
	All Budget Review	Contract	Federal Government	Total	All Budget Review	Contract	Federal Government	Total
Newfoundland	40	5	1	46	87.0	10.9	2.2	100.0
Prince Edward Island	9	-	-	9	100.0	-	-	100.0
Nova Scotia	47	-	1	48	97.9	-	2.1	100.0
New Brunswick	40	-	2	42	95.2	-	4.8	100.0
Quebec	165	94	13	272	60.7	34.5	4.8	100.0
Ontario	216	93	14	323	66.9	28.8	4.3	100.0
Manitoba	81	7	17	105	77.1	6.7	16.2	100.0
Saskatchewan	153	5	4	162	94.4	3.1	2.5	100.0
Alberta	131	25	8	164	79.9	15.2	4.9	100.0
British Columbia	91	14	6	111	82.0	12.6	5.4	100.0
Yukon	2	-	3	5	40.0	-	60.0	100.0
Northwest Territories	1	8	17	26	3.8	30.8	65.4	100.0
CANADA	976	251	86	1,313	74.3	19.1	6.5	100.0
							34	1,347

(1) Excludes 3 hospitals located in the U.S.A. near Canadian Border and listed in the agreements with New Brunswick and Manitoba.

(2) Includes: a) Budget review facilities consisting of: two provincial laboratories in Alberta, and one in Saskatchewan; one medical arts laboratory in Saskatchewan; three cancer clinics in Alberta; two clinics in Saskatchewan and one clinic in Manitoba; Dartmouth Medical Centre in Nova Scotia; two physical restoration centres and three nursing stations in Saskatchewan. b) Eighteen contract facilities consisting of Red Cross Blood depots in the ten provinces and two territories.

TABLE A9

NUMBER AND PERCENTAGE DISTRIBUTION OF BEDS AND CRIBS SET UP ON DECEMBER 31, IN HOSPITALS LISTED IN HOSPITAL INSURANCE AGREEMENTS, BY STATUS OF HOSPITAL AND BY PROVINCE, 1964

PROVINCE	Number of Hospitals Reporting	Number				Percentage Distribution			
		All Budget Review	Contract	Federal Government	Total	All Budget Review	Contract	Federal Government	Total
Newfoundland	46	2,344	156	42	2,542	92.2	6.1	1.7	100.0
Prince Edward Island	9	628	-	-	628	100.0	-	-	100.0
Nova Scotia	48	4,082	-	455	4,537	90.0	-	10.0	100.0
New Brunswick	42	3,705	-	426	4,131	89.7	-	10.3	100.0
Quebec	269 ⁽¹⁾	29,434	2,864	2,171	34,469	85.4	8.3	6.3	100.0
Ontario	319 ⁽²⁾	40,330	2,511	3,549	46,390	86.9	5.4	7.7	100.0
Manitoba	104 ⁽³⁾	6,036	120	836	6,992	86.3	1.7	12.0	100.0
Saskatchewan	156 ⁽⁴⁾	7,837	10	90	7,937	98.7	0.1	1.1	100.0
Alberta	160 ⁽⁵⁾	10,925	946	933	12,804	85.3	7.3	7.4	100.0
British Columbia	111	9,510	107	1,938	11,555	82.3	0.9	16.8	100.0
Yukon	5	26	-	126	152	17.1	-	82.9	100.0
Northwest Territories	26	44	240	202	486	9.0	49.4	41.6	100.0
CANADA	1,295	114,901	6,954	10,768	132,623	86.6	5.2	8.1	100.0

- (1) 1 contract and 2 federal hospitals did not submit annual reports.
(2) 1 contract and 3 federal hospitals did not submit their annual reports.
(3) 1 federal hospital did not submit an annual report.
(4) 1 budget review, 4 contract and 1 federal hospital did not submit their annual reports.
(5) 4 federal hospitals did not report.
In all a total of 18 hospitals did not report. In 1963, these 18 hospitals had a total estimated beds of 203.

TABLE A10

NUMBER AND PERCENTAGE DISTRIBUTION OF BUDGET REVIEW GENERAL HOSPITALS, GROUPED
ACCORDING TO THEIR RATED BED CAPACITY, BY PROVINCE, 1964

PROVINCE	Size of Hospital (Rated Bed Capacity)									Total
	1-9	10-24	25-49	50-99	100-199	200-299	300-499	500-999	1,000 and over	
Number of Hospitals										
Newfoundland	8	14	9	2	4	1	1	1	—	40
Prince Edward Island	—	2	2	1	2	1	—	—	—	8
Nova Scotia	4	10	11	6	8	3	1	1	—	44
New Brunswick	2	7	8	6	7	4	1	1	—	36
Quebec	1	7	13	20	48	15	12	10	2	128
Ontario	6	14	32	44	33	24	23	11	3	190
Manitoba	8	35	16	8	3	3	1	2	—	76
Saskatchewan	23	77	27	9	6	1	4	2	—	149
Alberta	3	23	40	26	6	2	3	2	1	106
British Columbia	—	15	29	18	17	2	2	2	1	86
Yukon	—	2	—	—	—	—	—	—	—	2
Northwest Territories	—	—	1	—	—	—	—	—	—	1
CANADA	55	206	188	140	134	56	48	32	7	866
Percentage of Hospitals										
Newfoundland	20.0	35.0	22.5	5.0	10.0	2.5	2.5	2.5	—	100.0
Prince Edward Island	—	25.0	25.0	12.5	25.0	12.5	—	—	—	100.0
Nova Scotia	9.1	22.7	25.0	13.6	18.2	6.8	2.3	2.3	—	100.0
New Brunswick	5.6	19.4	22.2	16.7	19.4	11.1	2.8	2.8	—	100.0
Quebec	.8	5.5	10.2	15.6	37.5	11.7	9.4	7.8	1.6	100.0
Ontario	3.1	7.4	16.8	23.2	17.4	12.6	12.1	5.8	1.6	100.0
Manitoba	10.5	46.1	21.1	10.5	3.9	3.9	1.3	2.6	—	100.0
Saskatchewan	15.4	51.7	18.1	6.0	4.0	.7	2.7	1.3	—	100.0
Alberta	2.8	21.7	37.7	24.5	5.7	1.9	2.8	1.9	.9	100.0
British Columbia	—	17.4	33.7	20.9	19.8	2.3	2.3	2.3	1.2	100.0
Yukon	—	100.	—	—	—	—	—	—	—	100.0
Northwest Territories	—	—	100.	—	—	—	—	—	—	100.0
CANADA	6.4	23.8	21.7	16.2	15.5	6.5	5.5	3.7	.8	100.0

TABLE A11

NUMBER AND PERCENTAGE DISTRIBUTION OF BEDS SET UP IN BUDGET REVIEW GENERAL HOSPITALS, GROUPED ACCORDING TO THEIR RATED BED CAPACITY, BY PROVINCE, 1964

PROVINCE	Size of Hospital (Rated Bed Capacity)									
	1-9	10-24	25-49	50-99	100-199	200-299	300-499	500-999	1,000 and over	Total
NUMBER OF BEDS SET UP										
Newfoundland	57	288	372	143	513	210	217	544	-	2,344
Prince Edward Island	-	34	62	50	288	164	-	-	-	598
Nova Scotia	47	184	423	465	1,133	604	474	568	-	3,898
New Brunswick	23	136	311	429	827	884	367	541	-	3,518
Quebec	6	159	473	1,358	6,703	3,513	4,489	5,636	2,056	24,393
Ontario	45	280	1,320	3,307	4,755	5,904	8,293	7,570	3,633	35,107
Manitoba	81	678	606	589	389	696	408	1,575	-	5,022
Saskatchewan	222	1,370	983	763	923	254	1,381	1,296	-	7,192
Alberta	41	474	1,362	1,790	877	487	1,048	1,745	1,091	8,915
British Columbia	-	324	1,079	1,331	2,399	526	878	1,056	1,594	9,187
Yukon	-	26	-	-	-	-	-	-	-	26
Northwest Territories	-	-	44	-	-	-	-	-	-	44
CANADA	522	3,953	7,035	10,225	18,807	13,242	17,555	20,531	8,374	100,244
PERCENTAGE OF BEDS SET UP										
Newfoundland	2.4	12.3	15.9	6.1	21.9	9.0	9.2	23.2	-	100.0
Prince Edward Island	-	5.7	10.4	8.4	48.1	27.4	-	-	-	100.0
Nova Scotia	1.2	4.7	10.8	11.9	29.1	15.5	12.2	14.6	-	100.0
New Brunswick	.7	3.9	8.8	12.2	23.5	25.1	10.4	15.4	-	100.0
Quebec	*	.7	1.9	5.6	27.5	14.4	18.4	23.1	8.4	100.0
Ontario	.1	.8	3.8	9.4	13.5	16.8	23.6	21.6	10.3	100.0
Manitoba	1.6	13.5	12.1	11.7	7.7	13.9	8.1	31.4	-	100.0
Saskatchewan	3.1	19.0	13.7	10.6	12.8	3.5	19.2	18.0	-	100.0
Alberta	.5	5.3	15.3	20.1	9.8	5.5	11.7	19.6	12.2	100.0
British Columbia	-	3.5	11.7	14.5	26.1	5.7	9.6	11.5	17.4	100.0
Yukon	-	100.	-	-	-	-	-	-	-	100.0
Northwest Territories	-	-	100.	-	-	-	-	-	-	100.0
CANADA	.5	3.9	7.0	10.2	18.8	13.2	17.5	20.5	8.4	100.0

* Less than 0.05.

TABLE A12

ALL BUDGET REVIEW HOSPITALS: NUMBER AND PERCENTAGE DISTRIBUTION OF BEDS AND CRIBS SET UP BY TYPE OF UNIT, BY PROVINCE, 1964

PROVINCE	Acute Treatment					Chronic and Con- valescent	Total
	General	Obstetric	Paediatric	Psychi- atric	Total		
NUMBER							
Newfoundland	1,558	301	412	8	2,279	65	2,344
Prince Edward Island	386	85	106	—	577	51	628
Nova Scotia	2,647	641	651	60	3,999	83	4,082
New Brunswick	2,274	492	706	45	3,517	188	3,705
Quebec	17,143	3,188	4,599	490	25,420	4,014	29,434
Ontario	24,289	4,432	4,141	657	33,519	6,811	40,330
Manitoba	3,383	707	775	160	5,025	1,011	6,036
Saskatchewan	4,886	903	1,151	178	7,118	719	7,837
Alberta	5,656	1,248	1,378	102	8,384	2,541	10,925
British Columbia	6,347	1,179	1,520	105	9,151	359	9,510
Yukon	15	6	5	—	26	—	26
Northwest Territories	24	6	14	—	44	—	44
CANADA	68,608	13,188	15,458	1,805	99,059	15,842	114,901
PERCENT							
Newfoundland	66.5	12.8	17.6	.3	97.2	2.8	100.0
Prince Edward Island	61.5	13.5	16.9	—	91.9	8.1	100.0
Nova Scotia	64.8	15.7	15.9	1.5	98.0	2.0	100.0
New Brunswick	61.4	13.3	19.0	1.2	94.9	5.1	100.0
Quebec	58.2	10.8	15.6	1.7	86.4	13.6	100.0
Ontario	60.2	11.0	10.3	1.6	83.1	16.9	100.0
Manitoba	56.0	11.7	12.8	2.7	83.3	16.7	100.0
Saskatchewan	62.3	11.5	14.7	2.3	90.8	9.2	100.0
Alberta	51.8	11.4	12.6	.9	76.7	23.3	100.0
British Columbia	66.7	12.4	16.0	1.4	96.2	3.8	100.0
Yukon	57.7	23.1	19.2	—	100.0	—	100.0
Northwest Territories	54.5	13.6	31.8	—	100.0	—	100.0
CANADA	59.7	11.5	13.4	1.6	86.2	13.8	100.0

TABLE A13

CONTRACT AND FEDERAL HOSPITALS: NUMBER OF BEDS AND CRIBS SET UP ON
DECEMBER 31, BY TYPE OF UNIT, BY PROVINCE, 1964

PROVINCE	Number of Hosp- itals Re- porting	Acute Treatment					Chronic and Con- valescent	Total
		General	Obste- tric	Paedi- atric	Psychi- atric	Total		
CONTRACT								
Newfoundland	5	42	9	14	—	65	91	156
Prince Edward Island	—	—	—	—	—	—	—	—
Nova Scotia	—	—	—	—	—	—	—	—
New Brunswick	—	—	—	—	—	—	—	—
Quebec	93	833	266	103	—	1,202	1,662	2,864
Ontario	92	686	99	71	—	856	1,655	2,511
Manitoba	7	81	17	22	—	120	—	120
Saskatchewan	1	6	1	3	—	10	—	10
Alberta	2	15	10	8	—	33	—	33
British Columbia	14	86	5	15	1	107	—	107
Yukon	—	—	—	—	—	—	—	—
Northwest Territories	8	114	23	69	—	206	34	240
CANADA	222	1,863	430	305	1	2,599	3,442	6,041
FEDERAL GOVERNMENT								
Newfoundland	1	18	16	8	—	42	—	42
Prince Edward Island	—	—	—	—	—	—	—	—
Nova Scotia	1	239	—	—	24	263	192	455
New Brunswick	2	197	—	—	32	229	197	426
Quebec	11	934	9	63	478	1,484	687	2,171
Ontario	11	1,539	25	63	783	2,410	1,139	3,549
Manitoba	16	500	24	35	32	591	245	836
Saskatchewan	3	22	4	23	—	49	41	90
Alberta	4	476	16	110	—	602	331	933
British Columbia	6	929	3	57	44	1,033	905	1,938
Yukon	3	65	24	35	2	126	—	126
Northwest Territories	17	123	26	20	—	169	33	202
CANADA	75	5,042	147	414	1,395	6,998	3,770	10,768

TABLE A14

AVERAGE PERCENTAGE OCCUPANCY, (1) HOSPITALS LISTED IN HOSPITAL INSURANCE AGREEMENTS BY STATUS OF HOSPITAL AND BY PROVINCE, 1964

PROVINCE	Budget Review General	Budget Review Chronic and Convalescent	Other Budget Review Special	All Budget Review	Contract	Federal
Newfoundland	79.8	—	—	79.8	75.3	24.3
Prince Edward Island	76.0	83.9	—	76.4	—	—
Nova Scotia	78.6	71.1	89.9	78.3	—	80.6
New Brunswick	80.1	88.5	19.0 ⁽²⁾	80.2	—	73.5
Quebec	81.3	89.7	67.1	82.2	88.8	78.7
Ontario	82.5	85.9	82.1	82.9	88.4	76.3
Manitoba	79.9	88.8	89.9	81.5	53.4	69.0
Saskatchewan	76.5	93.6	—	77.9	102.2 ⁽³⁾	82.5
Alberta	75.2	82.9	87.0	76.6	50.6	72.5
British Columbia	81.2	—	81.3	81.2	32.7	82.1
Yukon	32.6	—	—	32.6	—	42.1
Northwest Territories	49.5	—	—	49.5	35.4	38.9
CANADA	80.5	87.2	75.3	81.2	79.9	75.8

(1) Patient-days during year as a percentage of available bed-days during year.

(2) No extensive inpatient service was provided; will be listed in September 1965.

(3) Exceeds 100 per cent because of the change of number of beds set up during the year with fluctuations.

TABLE A15

BUDGET REVIEW GENERAL HOSPITALS: AVERAGE PERCENTAGE OCCUPANCY⁽¹⁾ BY BED-SIZE OF HOSPITAL AND BY PROVINCE, 1964

PROVINCE	Number of Hospi- tals Report- ing	Bed-size of Hospital (Rated Bed Capacity)								1,000 and over	Total
		1-9	10-24	25-49	50-99	100-199	200-299	300-499	500-999		
Newfoundland	40	27.9	49.9	65.6	78.2	95.4	92.6	76.4	93.3	-	79.8
Prince Edward Island	8	-	57.1	82.7	49.8	80.3	77.6	-	-	-	76.0
Nova Scotia	44	46.3	64.0	76.6	77.6	74.6	82.9	74.5	94.8	-	78.6
New Brunswick	36	83.6	60.8	79.4	71.0	82.1	80.0	89.6	82.9	-	80.1
Quebec	128	56.1	72.1	72.8	80.1	77.0	78.1	84.2	84.0	90.7	81.3
Ontario	190	38.6	60.4	70.7	77.4	79.6	80.7	83.8	86.5	89.2	82.5
Manitoba	76	63.3	63.2	71.4	76.9	80.0	81.7	87.3	89.3	-	79.9
Saskatchewan	148	53.8	68.6	73.0	75.5	77.1	81.7	85.1	81.5	-	76.5
Alberta	106	47.1	58.2	66.9	70.3	76.7	80.2	86.4	83.9	74.8	75.2
British Columbia	86	-	59.6	67.4	77.1	79.5	86.3	87.0	88.3	91.4	81.2
Yukon	2	-	32.6	-	-	-	-	-	-	-	32.6
Northwest Territories	1	-	-	49.5	-	-	-	-	-	-	49.5
CANADA	865	51.2	63.0	70.4	75.9	78.6	80.5	84.2	85.9	88.1	80.5

(1) Patient-days during year as a percentage of available bed-days during year.

TABLE A16

BASSINETS, PATIENT-DAYS DURING THE YEAR, SEPARATIONS AND AVERAGE LENGTH OF STAY OF NEWBORNS, IN HOSPITALS LISTED IN HOSPITAL INSURANCE AGREEMENTS, BY PROVINCE, 1964 ⁽¹⁾

PROVINCE	Bassinets	Patient-days During the Year	Separations	Average length of Stay
Newfoundland	477	52,408	8,897	5.9
Prince Edward Island	136	17,397	2,742	6.3
Nova Scotia	845	121,521	18,376	6.6
New Brunswick	705	101,316	15,653	6.5
Quebec	4,197	811,089	129,394	6.3
Ontario	6,083	1,061,006	153,892	6.9
Manitoba	1,034	143,103	21,893	6.5
Saskatchewan	1,350	146,305	22,556	6.5
Alberta	1,675	253,722	35,558	7.1
British Columbia	1,561	262,112	35,841	7.3
Yukon	45	3,211	511	6.3
Northwest Territories	82	5,460	840	6.5
CANADA	18,190	2,978,650	446,153	6.7

(1) Not all hospitals reported the 3 items. Average length of stay calculated for hospitals reporting patient-days and separations.

TABLE A17
REVENUE FUND EXPENDITURES OF ALL BUDGET REVIEW HOSPITALS, BY TYPE OF ACCOUNT,
BY PROVINCE, 1964

PROVINCE	Number of Hospitals Reporting	Departmental Expense						Other (Non-departmental) Revenue Fund Expense (1)	Total Revenue Fund Expense	Number of Patient-days During Year
		Salaries and Wages	Medical and Surgical Supplies	Drugs	Raw Food	Other Departmental Expense and Supplies	Total Departmental Expense			
	\$	\$	\$	\$	\$	\$	\$	\$	\$	\$
Newfoundland	40	8,704,484	605,700	958,177	1,657,897	3,523,300	15,449,558	1,060,573	16,510,131	630,111
Prince Edward Island	9	2,238,847	130,697	155,816	296,665	793,087	3,615,112	361,012	3,976,124	175,571
Nova Scotia	47	19,810,026	1,072,918	1,277,491	2,187,866	7,253,490	31,601,791	2,668,362	34,270,153	1,167,246
New Brunswick	40	18,147,838	1,023,480	1,231,975	1,934,937	5,675,755	28,013,985	3,206,599	31,220,584	1,090,044
Quebec	165	187,282,519	8,803,422	11,269,092	14,492,751	42,028,798	263,876,582	21,427,989	285,304,571	8,828,700
Ontario	216	237,193,838	11,414,191	13,346,280	17,829,487	60,017,771	339,801,567	22,880,565	362,682,132	12,161,586
Manitoba	81	29,557,997	1,473,090	2,017,267	2,358,608	6,984,590	42,391,552	2,809,988	45,201,540	1,774,371
Saskatchewan	144	32,867,441	1,586,640	1,957,344	2,715,406	8,143,352	47,270,183	3,532,996	50,803,179	1,966,277
Alberta	131	45,270,776	2,190,115	2,539,604	4,551,309	10,485,406	65,037,210	7,352,381	72,389,591	2,960,127
British Columbia	91	53,208,465	2,540,105	2,906,883	3,932,918	11,685,014	74,273,385	4,604,622	78,878,007	2,819,401
Yukon	2	87,415	5,931	8,112	15,416	30,447	147,321	8,554	155,875	3,102
Northwest Territories	1	150,261	9,426	5,520	16,107	67,231	248,545	21,568	270,113	7,974
CANADA	967	634,519,907	30,855,715	37,673,561	51,989,367	156,688,241	911,726,791	69,935,209	981,662,000	33,584,510

(1) Excludes 9 budget review hospitals for which HS-2 returns not received

(2) Includes mainly items such as interest, depreciation, and rent, that do not relate to particular departments of the hospital.

TABLE A18

REVENUE FUND EXPENDITURES PER PATIENT-DAY⁽¹⁾ OF ALL BUDGET REVIEW HOSPITALS, BY TYPE OF ACCOUNT,
BY PROVINCE, 1964

PROVINCE	Departmental Expense						Other (Non-departmental) Revenue Fund Expense	Total Revenue Fund Expense
	Salaries and Wages	Medical and Surgical Supplies	Drugs	Raw Food	Other Departmental Expense and Supplies	Total Departmental Expense		
Newfoundland	\$ 13.81	\$.96	\$ 1.52	\$ 2.63	\$ 5.59	\$ 24.52	\$ 1.68	\$ 26.20
Prince Edward Island	12.75	.74	.89	1.69	4.52	20.59	2.06	22.65
Nova Scotia	16.97	.92	1.09	1.87	6.21	27.07	2.29	29.36
New Brunswick	16.65	.94	1.13	1.78	5.21	25.70	2.94	28.64
Quebec	21.21	1.00	1.28	1.64	4.76	29.89	2.43	32.32
Ontario	19.50	.94	1.10	1.47	4.93	27.94	1.88	29.82
Manitoba	16.66	.83	1.14	1.33	3.94	23.89	1.58	25.47
Saskatchewan	16.72	.81	1.00	1.38	4.14	24.04	1.80	25.84
Alberta	15.29	.74	.86	1.54	3.54	21.97	2.48	24.45
British Columbia	18.87	.90	1.03	1.39	4.14	26.34	1.63	27.98
Yukon	28.18	1.91	2.62	4.97	9.82	47.49	2.76	50.25
Northwest Territories	18.84	1.18	.69	2.02	8.43	31.17	2.70	33.87
CANADA	18.89	.92	1.12	1.55	4.67	27.15	2.08	29.23

(1) Patient-days during year for adults and children, excluding newborns.

TABLE A19

REVENUE FUND EXPENDITURES PER CAPITA ⁽¹⁾ OF ALL BUDGET REVIEW HOSPITALS, BY TYPE OF ACCOUNT, BY PROVINCE, 1964

PROVINCE	Department Expense					Other (Non-departmental) Revenue Fund Expense	Total Revenue Fund Expense
	Salaries and Wages	Medical and Surgical Supplies	Drugs	Raw Food	Other Departmental Expense and Supplies	Total Departmental Expense	
	\$	\$	\$	\$	\$	\$	\$
Newfoundland	17.73	1.23	1.95	3.38	7.18	31.47	33.63
Prince Edward Island	20.92	1.22	1.46	2.77	7.41	33.79	37.16
Nova Scotia	26.07	1.41	1.68	2.88	9.54	41.58	45.09
New Brunswick	29.41	1.66	2.00	3.14	9.20	45.40	50.60
Quebec	33.67	1.58	2.03	2.61	7.56	47.44	51.30
Ontario	36.01	1.73	2.03	2.71	9.11	51.59	55.07
Manitoba	30.85	1.54	2.11	2.46	7.29	44.25	47.18
Saskatchewan	34.85	1.68	2.08	2.88	8.64	50.13	53.87
Alberta	31.61	1.53	1.77	3.18	7.32	45.42	50.55
British Columbia	30.61	1.46	1.67	2.26	6.72	42.73	45.38
Yukon	5.46	.37	.51	.96	1.90	9.21	9.74
Northwest Territories	6.01	.38	.22	.64	2.69	9.94	10.80
CANADA	32.99	1.60	1.96	2.70	8.15	47.40	51.04

(1) Based on 1964 intercensal population estimates as at June 1, prepared by Dominion Bureau of Statistics.

TABLE A20
PERCENTAGE DISTRIBUTION OF REVENUE FUND EXPENDITURES OF ALL BUDGET REVIEW HOSPITALS, BY TYPE OF ACCOUNT,
BY PROVINCE, 1964

PROVINCE	Departmental Expense						Other (Non-departmental) Revenue Fund Expense	Total Revenue Fund Expense
	Salaries and Wages	Medical and Surgical Supplies	Drugs	Raw Food	Other Departmental Expense and Supplies	Total Departmental Expense		
Newfoundland	52.7	3.7	5.8	10.0	21.3	93.6	6.4	100.0
Prince Edward Island	56.3	3.3	3.9	7.5	19.9	90.9	9.1	100.0
Nova Scotia	57.8	3.1	3.7	6.4	21.2	92.2	7.8	100.0
New Brunswick	58.1	3.3	3.9	6.2	18.2	89.7	10.3	100.0
Quebec	65.6	3.1	3.9	5.1	14.7	92.5	7.5	100.0
Ontario	65.4	3.1	3.7	4.9	16.5	93.7	6.3	100.0
Manitoba	65.4	3.3	4.5	5.2	15.5	93.8	6.2	100.0
Saskatchewan	64.7	3.1	3.9	5.3	16.0	93.0	7.0	100.0
Alberta	62.5	3.0	3.5	6.3	14.5	89.8	10.2	100.0
British Columbia	67.5	3.2	3.7	5.0	14.8	94.2	5.8	100.0
Yukon	56.1	3.8	5.2	9.9	19.5	94.5	5.5	100.0
Northwest Territories	55.6	3.5	2.0	6.0	24.9	92.0	8.0	100.0
CANADA	64.6	3.1	3.8	5.3	16.0	92.9	7.1	100.0

TABLE A21

HOSPITALIZATION BY PRIMARY DIAGNOSIS ACCORDING TO THE CANADIAN LIST OF 98 DIAGNOSES, ADULT AND CHILD
IN-PATIENTS INSURED BY PROVINCIAL PLANS⁽¹⁾, TEN PROVINCES AND TWO TERRITORIES, 1964

Canadian List Number and Diagnosis	I.S.C. No.	Separations		Days of Care For Separations		Average Stay of Separations	Percentage Distribution	
		Total	Per 1000 Population	Total	Per 1000 Population		Separations	Days of Care
ALL CAUSES (1-94) ⁽²⁾		3,074,067	159.8	36,869,080	1916.8	12.0	100.0	100.0
I. INFECTIVE AND PARASITIC DISEASES								
1. Tuberculosis, all forms	001-019	43,624	2.3	615,626	32.0	14.1	1.4	1.7
2. Poliomyelitis and encephalitis	080-083	3,628	0.2	68,060	3.2	18.8	0.1	0.2
3. Infectious hepatitis	092	2,441	0.1	99,424	5.2	40.7	0.1	0.3
4. Other diseases attributable to viruses	084-091,093-096	5,729	0.3	79,741	4.1	13.9	0.2	0.2
5. Other infective bacterial, spirochaetal rickettsial or parasitic diseases	020-064,070-074 100-108,110-117 120-138	15,377	0.8	139,750	7.3	9.1	0.5	0.4
		16,449	0.9	228,651	11.9	13.9	0.5	0.6
II. NEOPLASMS								
6. Malignant neoplasms of buccal cavity and pharynx	140-148	165,867	8.6	3,187,484	165.7	19.2	5.4	8.6
7. Malignant neoplasms of stomach	151	2,802	0.1	66,425	3.5	23.7	0.1	0.2
8. Malignant neoplasm of large intestine except rectum	153	4,885	0.3	140,303	7.3	28.7	0.2	0.4
9. Malignant neoplasm of rectum	154	7,139	0.4	244,117	12.7	34.2	0.2	0.7
10. Malignant neoplasm of bronchus, trachea, & lung, primary & unspecified as to whether primary or secondary	162,163 170	4,021	0.2	148,706	7.7	37.0	0.1	0.4
11. Malignant neoplasm of breast		7,350 10,170	0.4 0.5	199,312 270,219	10.4 14.0	27.1 26.6	0.2 0.3	0.5 0.7

TABLE A21 (Cont'd)

Canadian List Number and Diagnosis	I.S.C. No.	Separations		Days of Care For Separations		Average Stay of Separations	Percentage Distribution	
		Total	Per 1000 Population	Total	Per 1000 Population		Separations	Days of Care
II. NEOPLASMS (Cont'd)								
12. Malignant neoplasm of cervix uteri	171	7,538	0.4	131,433	6.8	17.4	0.2	0.4
13. Malignant neoplasm of uterus other than of cervix uteri	172-174	2,865	0.1	55,843	2.9	19.5	0.1	0.2
14. Malignant neoplasm of ovary, Fallopian tube and broad ligament	175	2,059	0.1	52,947	2.8	25.7	0.1	0.1
15. Malignant neoplasm of prostate	177	6,464	0.3	215,002	11.2	33.3	0.2	0.6
16. Malignant neoplasm of kidney, bladder and other urinary organs	180,181	6,524	0.3	155,580	8.1	23.8	0.2	0.4
17. Leukaemia and aleukaemia	204	4,075	0.2	83,237	4.3	20.4	0.1	0.2
18. Other malignant neoplasms and neoplasms of lymphatic and haematopoietic tissue	150,152,155-161, 164,165,176,178, 179,190,199,200-203,205	24,735	1.3	684,887	35.6	27.7	0.8	1.9
19. Benign neoplasm of uterus	214,215	25,286	1.3	267,566	13.9	10.6	0.8	0.7
20. Benign neoplasm of ovary	216	9,003	0.5	97,414	5.1	10.8	0.3	0.3
21. Benign neoplasms (excluding uterus and ovary) and neoplasm of unspecified nature	210-213 217-239	40,951	2.1	374,493	19.5	9.1	1.3	1.0
III. ALLERGIC, ENDOCRINE SYSTEM, METABOLIC AND NUTRITIONAL DISEASES								
22. Asthma	241	86,834	4.5	1,408,804	73.2	16.2	2.8	3.8
23. Other allergic disorders, excluding asthma		19,937	1.0	227,754	11.8	11.4	0.6	0.6
240,242-245		6,809	0.4	55,705	2.9	8.2	0.2	0.2

TABLE A21 (Cont'd)

Canadian List Number and Diagnosis	I.S.C. No.	Separations		Days of Care For separations		Average Stay of Separations	Percentage Distribution	
		Total	Per 1000 Population	Total	Per 1000 Population		Separations	Days of Care
III. ALLERGIC ENDOCRINE SYSTEM, METABOLIC AND NUTRITIONAL DISEASES (Cont'd)								
24. Diseases of thyroid gland	250-254	11,655	0.6	138,481	7.2	11.9	0.4	0.4
25. Diabetes mellitus	260	36,737	1.9	796,167	41.4	21.7	1.2	2.2
26. Diseases of other endocrine glands	270-277	3,214	0.2	48,797	2.5	15.2	0.1	0.1
27. Avitaminoses and other metabolic diseases	280-289	8,482	0.4	141,900	7.4	16.7	0.3	0.4
IV. DISEASES OF THE BLOOD AND BLOOD-FORMING ORGANS								
28. Diseases of the blood and blood-forming organs	290-299	17,403	0.9	263,037	13.7	15.1	0.6	0.7
		17,403	0.9	263,037	13.7	15.1	0.6	0.7
V. MENTAL, PSYCHONEUROTIC, AND PERSONALITY DISORDERS								
29. Psychoses	300-309	84,208	4.4	1,561,524	81.2	18.5	2.7	4.2
30. Psychoneurotic disorders	310-318	18,014	0.9	515,169	26.8	28.6	0.6	1.4
31. Disorders of character behaviour and intelligence	320-326	50,851	2.6	799,215	41.6	15.7	1.7	2.2
		15,343	0.8	247,140	12.8	16.1	0.5	0.7
VI. DISEASES OF THE NERVOUS SYSTEM AND SENSE ORGANS								
32. Vascular lesions affecting central nervous system	330-334	148,699	7.7	4,100,623	213.2	27.6	4.8	11.1
33. Inflammatory and other diseases of central nervous system		34,294	1.8	1,598,315	83.1	46.6	1.1	4.3
	340-345, 350-357	28,777	1.5	1,708,147	88.8	59.4	0.9	4.6

TABLE A21 (Cont'd)

Canadian List Number and Diagnosis	I.S.C. No.	Separations		Days of Care For Separations		Average Stay of Separations	Percentage Distribution	
		Total	Per 1000 Population	Total	Per 1000 Population		Separations	Days of Care
VI. DISEASES OF THE NERVOUS SYSTEM AND SENSE ORGANS (Cont'd)	34. Diseases of nerves and peripheral ganglia	10,520	0.5	143,560	7.5	13.6	0.3	0.4
	35. Diseases and conditions of the eye	41,594	2.2	374,761	19.5	9.0	1.4	1.0
	36. Diseases of ear and mastoid process	33,514	1.7	275,840	14.3	8.2	1.1	0.7
VII. DISEASES OF THE CIRCULATORY SYSTEM	37. Rheumatic fever and chronic rheumatic heart disease	243,297	12.6	5,411,556	281.3	22.2	7.9	14.7
	38. Arteriosclerotic and degenerative heart disease	11,356	0.6	230,617	12.0	20.3	0.4	0.6
	39. Other diseases of the heart	102,810	5.3	2,725,801	141.7	26.5	3.3	7.4
	40. Hypertensive heart disease and other hypertensive disease	24,426	1.3	499,609	26.0	20.5	0.8	1.4
	41. Diseases of arteries	24,810	1.3	531,658	27.6	21.4	0.8	1.4
	42. Varicose veins of lower extremities	15,214	0.8	692,565	36.0	45.5	0.5	1.9
	43. Haemorrhoids	20,956	1.1	269,875	14.0	12.9	0.7	0.7
	44. Phlebitis and thrombophlebitis	20,478	1.1	190,137	9.9	9.3	0.7	0.5
	45. Other diseases of the circulatory system	6,614	0.3	107,452	5.6	16.2	0.2	0.3
		16,633	0.9	163,842	8.5	9.9	0.5	0.4
VIII. DISEASES OF THE RESPIRATORY SYSTEM	46. Acute upper respiratory infections	474,097	24.6	3,106,732	161.5	6.6	15.4	8.4
	47. Influenza	50,559	2.6	295,533	15.4	5.8	1.6	0.8
		16,361	0.9	109,626	5.7	6.7	0.5	0.3

TABLE A21 (Cont'd)

Canadian List Number and Diagnosis	I.S.C. No.	Separations		Days of Care For Separations		Average Stay of Separations	Percentage Distribution	
		Total	Per 1000 Population	Total	Per 1000 Population		Separations	Days of Care
VIII. DISEASES OF THE RESPIRATORY SYSTEM (Cont'd)								
48. Pneumonia	490-493	99,619	5.2	1,174,719	61.1	11.8	3.2	3.2
49. Bronchitis	500-502	58,256	3.0	587,300	30.5	10.1	1.9	1.6
50. Hypertrophy of tonsils and adenoids	510	200,408	10.4	432,327	22.5	2.2	6.5	1.2
51. Other diseases of respiratory system	511-527	48,894	2.5	507,227	26.4	10.4	1.6	1.4
IX. DISEASES OF THE DIGESTIVE SYSTEM								
52. Diseases of teeth and supporting structure	530-535	414,223	21.5	4,289,031	223.0	10.4	13.5	11.6
53. Ulcer of stomach, duodenum and jejunum	540-542	30,283	1.6	66,199	3.4	2.2	1.0	0.2
54. Gastritis, duodenitis and other disorders and diseases of the stomach and duodenum	543-545	47,248	2.5	688,661	35.8	14.6	1.5	1.9
55. Appendicitis	550-553	27,499	1.4	226,857	11.8	8.2	0.9	0.6
56. Hernia of abdominal cavity	560-561	54,600	2.8	427,844	22.8	7.8	1.8	1.2
57. Intestinal obstruction without mention of hernia	570	65,801	3.4	628,582	32.7	9.6	2.1	1.7
58. Gastro-enteritis and colitis, except ulcerative, age 4 weeks and over	571	9,507	0.5	121,707	6.3	12.8	0.3	0.3
59. Chronic enteritis and ulcerative colitis	572	51,920	2.7	405,619	21.1	7.8	1.7	1.1
60. Cirrhosis and other diseases of liver	580-583	12,060	0.6	199,920	10.4	16.6	0.4	0.5
		7,843	0.4	158,345	8.2	20.2	0.3	0.4

TABLE A21 (Cont'd)

Canadian List Number and Diagnosis SYSTEM (Cont'd)	I.S.C. No.	Separations		Days of Care For Separations		Average Stay of Separa- tions	Percentage Distribution	
		Total	Per 1000 Population	Total	Per 1000 Population		Separa- tions	Days of Care
IX. DISEASES OF THE DIGESTIVE SYSTEM (Cont'd)								
	584-587	71,727	3.7	1,000,456	52.0	13.9	2.3	2.7
	536-539, 573-578	35,735	1.9	364,841	19.0	10.2	1.2	1.0
X. DISEASES OF THE GENITO-URINARY SYSTEM								
	590-594	246,148	12.8	2,415,425	125.6	9.8	8.0	6.6
	600	8,471	0.4	159,883	8.3	18.9	0.3	0.4
		21,560	1.1	245,741	12.8	11.4	0.7	0.7
	602,604	17,805	0.9	176,146	9.2	9.9	0.6	0.5
	601,603,605-609	35,156	1.8	376,732	19.6	10.7	1.1	1.0
	610	19,272	1.0	398,675	20.7	20.7	0.6	1.1
	615	10,673	0.6	35,618	1.9	3.3	0.3	0.1
	622-626,630	35,094	1.8	267,195	13.9	7.6	1.1	0.7
	631	20,106	1.0	292,684	15.2	14.6	0.7	0.8
	634	35,101	1.8	169,154	8.8	4.8	1.1	0.5
	611-614,616,617, 620,621,632,633, 635-637	42,910	2.2	293,597	15.3	6.8	1.4	0.8
XI. DELIVERIES AND COMPLICATIONS OF PREGNANCY, CHILDBIRTH AND THE PUERPERIUM								
	640-649	595,715	31.0	3,405,644	177.1	5.7	19.4	9.2
	650-652	80,821	4.2	350,656	18.2	4.3	2.6	1.0
		54,449	2.8	213,475	11.1	3.9	1.8	0.6
73. Complications of pregnancy								
74. Abortion								

TABLE A21 (Cont'd)

Canadian List Number and Diagnosis	I.S.C. No.	Separations		Days of Care For Separations		Average Stay of Separations	Percentage Distribution	
		Total	Per 1000 Population	Total	Per 1000 Population		Separations	Days of Care
XI. DELIVERIES AND COMPLICATIONS OF PREGNANCY, CHILDBIRTH AND THE PUERPERIUM (Cont'd)								
	660	409,564	21.3	2,394,397	124.5	5.8	13.3	6.5
	670-678	43,158	2.2	383,596	19.9	8.9	1.4	1.0
	680-689	7,723	0.4	63,520	3.3	8.2	0.3	0.2
XII. DISEASES OF THE SKIN AND CELLULAR TISSUE								
		62,784	3.3	619,671	32.2	9.9	2.0	1.7
	690-698	30,025	1.6	237,551	12.3	7.9	1.0	0.6
	700-716	32,759	1.7	382,120	19.9	11.7	1.1	1.0
XIII. DISEASES OF BONES AND ORGANS OF MOVEMENT								
		105,887	5.5	2,118,420	110.1	20.1	3.4	5.7
	720-727	40,906	2.1	1,078,718	56.1	26.4	1.3	2.9
	735 730-734, 736-738, 740-749	20,256 44,725	1.1 2.3	353,470 686,232	18.4 35.7	17.5 15.3	0.7 1.5	1.0 1.9
XIV. CONGENITAL MALFORMATIONS								
	750-759	30,224 30,224	1.6 1.6	459,419 459,419	23.9 23.9	15.2 15.2	1.0 1.0	1.2 1.2
XV. CERTAIN DISEASES OF EARLY INFANCY								
	760-776	11,844 11,844	0.6 0.6	158,267 158,267	8.2 8.2	13.4 13.4	0.4 0.4	0.4 0.4

TABLE A21 (Cont'd)

Canadian List Number and Diagnosis	I.S.C. No.	Separations		Days of Care For Separations		Average Stay of Separations	Percentage Distribution	
		Total	Per 1000 Population	Total	Per 1000 Population		Separations	Days of Care
XVI. SYMPTOMS, SENILITY, AND ILL-DEFINED CONDITIONS	780-795	71,991	3.7	595,028	30.9	8.3	2.3	1.6
		71,991	3.7	595,028	30.9	8.3	2.3	1.6
XVII. ACCIDENTS, POISONINGS, AND VIOLENCE (NATURE OF INJURY)	N800-N804, N852-N856 N805-N809 N810-N819 N820-N821 N822-N829 N830-N848 N860-N869 N940-N949 N850, N851, N870-N888, N890-N898, N900-N908, N910-N918, N920-N936 N950-N999	271,222	14.1	3,152,789	163.9	11.6	8.8	8.6
		40,340	2.1	301,059	15.7	7.5	1.3	0.8
		15,008	0.8	329,326	17.1	21.9	0.5	0.9
		32,807	1.7	206,140	10.7	6.3	1.1	0.6
		16,282	0.8	834,732	43.4	51.3	0.5	2.3
		23,968	1.2	363,552	18.9	15.2	0.8	1.0
		25,477	1.3	218,475	11.4	8.6	0.8	0.6
		3,671	0.2	50,742	2.6	13.8	0.1	0.1
		11,081	0.6	183,998	9.6	16.6	0.4	0.5
		102,588	5.3	664,765	34.6	6.5	3.3	1.8

Source: Statistics Canada and Health Canada did not include out of province responsibility of Provincial Plan hospitalization data. Saskatchewan excluded responsibility for geriatric hospitals in Regina, Saskatoon, Melfort, and Swift Current. Prince Edward Island, Quebec, Ontario, Manitoba and Alberta included data for hospitalization not the responsibility of Provincial Plan.

(2) Excludes "Y" group supplementary classification for special admissions: live births and stillbirths (95-98).

(3) These figures are estimated to offset a coding variation that occurred in Ontario.

Source: Data supplied by the provinces to the Department of National Health and Welfare.

TABLE A22

DISTRIBUTION OF FULL-TIME AND PART-TIME PERSONNEL IN HOSPITALS LISTED IN HOSPITAL INSURANCE AGREEMENTS,
BY TYPE OF PERSONNEL, BY PROVINCE, 1964

CATEGORY	Newfoundland		Prince Edward Island		Nova Scotia		New Brunswick		Quebec		Ontario		Manitoba	
	F.T.	P.T.	F.T.	P.T.	F.T.	P.T.	F.T.	P.T.	F.T.	P.T.	F.T.	P.T.	F.T.	P.T.
Employees														
A. Medical	43	73	4	6	57	115	51	104	674	879	752	68	192	
B. Nursing														
Graduate Nurses	747	49	201	26	2,019	252	1,466	196	11,041	1,464	16,795	4,845	1,020	563
Qualified Nursing Assistants	269	1	91	2	639	45	753	30	4,003	205	6,337	709	822	140
Orderlies	157	3	23	1	146	—	308	4	3,050	96	3,071	154	497	5
Other	440	4	37	3	409	18	717	83	7,505	617	8,321	1,373	1,752	183
Total	1,613	57	352	32	3,213	315	3,244	313	25,599	2,382	34,524	7,081	4,091	891
C. Other Professional and Technical														
Hospital Administrators	29	22	9	2	56	2	44	8	276	25	341	18	105	16
Dietitians	10	—	3	1	37	7	34	4	251	22	332	41	47	6
Medical Record Librarians	7	—	4	—	64	2	39	—	224	21	279	27	57	13
Laboratory Technicians	94	1	11	1	185	6	54	—	1,424	140	1,637	175	233	18
Radiological Technicians	51	1	11	—	155	1	106	5	785	44	819	57	87	9
Combined Laboratory and Radiological Technicians	25	1	4	—	7	1	—	—	128	24	19	5	24	3
Physiotherapists	14	1	12	1	21	6	30	3	245	32	408	84	45	8
Occupational Therapists	4	—	1	—	8	—	8	—	69	10	118	15	29	5
Pharmacists	13	—	2	1	25	4	26	6	205	62	257	63	41	7
Psychologists	—	—	—	—	2	2	1	1	48	21	29	16	5	3
Social Workers	3	—	—	—	15	—	13	4	167	28	99	18	30	2
Total	250	26	57	6	575	31	355	31	3,822	429	4,338	519	703	90
D. Other Personnel	1,729(2)	52	334	30	2,899	138	2,628	143	23,588(3)	1,366	27,287	4,066	4,699	486
Total Employees	3,635	208	747	74	6,744	599	6,278	591	53,683	5,056	66,558	12,418	9,561	1,659
Trainees														
A. Medical														
Residents and Senior Interns	13	—	—	—	81	2	77	—	1,604	31	772	3	150	8
Junior Interns	23	1	1	—	55	6	12	—	496	48	368	9	74	18
Total	36	1	1	—	136	8	89	—	2,100	79	1,140	12	224	26
B. Nursing														
Student Nurses	617	xx	180	xx	1,188	xx	1,041	xx	6,632	xx	7,709	xx	1,163	xx
Nursing Assistants	155	xx	10	xx	104	xx	100	xx	2,090	xx	646	xx	157	xx
Total	772	xx	190	xx	1,292	xx	1,141	xx	8,722	xx	8,355	xx	1,320	xx
C. Other Professional and Technical														
Medical Record Librarians	—	xx	—	xx	9	xx	—	xx	23	xx	27	xx	3	xx
Laboratory Technicians	12	xx	—	xx	37	xx	3	xx	78	xx	504	xx	111	xx
Radiological Technicians	18	xx	7	xx	27	xx	41	xx	264	xx	431	xx	75	xx
Total	30	xx	7	xx	73	xx	44	xx	365	xx	962	xx	189	xx
Total Trainees	838	1	198	—	1,501	8	1,274	—	11,187	79	10,457	12	1,733	26
Total Personnel	4,473	209	945	74	8,245	607	7,752	591	64,870	5,135	77,015	12,430	11,294	1,685

TABLE A22 (cont'd)

Category	Saskatchewan		Alberta		British Columbia		Yukon		Northwest Territories		Canada	
	F.T.	P.T.	F.T.	P.T.	F.T.	P.T.	F.T.	P.T.	F.T.	P.T.	F.T.	P.T.
Employees												
A. Medical	55	48	61	93	101	255	-	-	6	1	1,529	2,518
B. Nursing												
Graduate Nurses	2,299	492	3,544	500	4,295	467	52	1	113	17	43,592	8,872
Qualified Nursing Assistants	728	44	1,845	79	1,046	58	-	-	41	6	16,574	1,319
Orderlies	340	8	556	23	775	22	-	-	1	-	8,924	316
Other	1,412	145	1,723	125	1,390	155	-	-	13	6	23,719	2,712
Total	4,779	689	7,668	727	7,506	702	52	1	168	29	92,809	13,219
C. Other Professional and Technical												
Hospital Administrators												
Dietitians	157	12	146	17	113	8	3	-	7	6	1,286	136
Medical Record Librarians	27	3	69	15	93	14	-	-	1	-	904	113
Laboratory Technicians	49	7	85	13	69	11	3	-	2	-	882	94
Radiological Technicians	241	4	356(1)	16(1)	399	21	2	-	3	-	4,639	382
Combined Laboratory and Radiological Technicians	105	-	129	9	166	19	2	-	3	-	2,419	145
Physiotherapists	104	11	76	6	13	4	-	-	1	1	401	56
Occupational Therapists	31	6	99	10	105	20	-	-	1	-	1,011	171
Pharmacists	46	8	47	17	51	17	1	-	1	-	295	38
Psychologists	4	-	2	1	2	2	-	-	-	-	715	185
Social Workers	17	3	14	8	42	3	-	-	-	-	93	46
Total	789	54	1,049	119	1,077	120	11	-	19	7	400	66
D. Other Personnel	3,698	398	5,187(4)	628	5,668(5)	835	90	8	169	54	13,045	1,432
Total Employees	9,321	11,189	13,965	1,567	14,352	1,912	153	9	362	91	185,359	25,373
Trainees												
A. Medical												
Residents and Senior Interns	88	-	139	2	170	1	-	-	-	-	3,094	47
Junior Interns	43	-	58	-	58	3	-	-	-	-	1,188	85
Total	131	-	197	2	228	4	-	-	-	-	4,282	132
B. Nursing												
Student Nurses	1,280	xx	1,821	xx	1,496	xx	-	xx	-	xx	23,127	xx
Nursing Assistants	134	xx	152	xx	173	xx	-	xx	-	xx	3,721	xx
Total	1,414	xx	1,973	xx	1,669	xx	-	xx	-	xx	26,848	xx
C. Other Professional and Technical												
Medical Record Librarians	8	xx	19	xx	6	xx	-	xx	-	xx	95	xx
Laboratory Technicians	135	xx	132	xx	91	xx	-	xx	-	xx	1,103	xx
Radiological Technicians	63	xx	95	xx	64	xx	-	xx	-	xx	1,085	xx
Total	206	xx	246	xx	161	xx	-	xx	-	xx	2,283	xx
Total Trainees	1,751	-	2,416	2	2,058	4	-	-	-	-	33,413	132
Total Personnel	11,072	1,189	16,381	1,569	16,410	1,916	153	9	362	91	218,772	25,505

xx Not applicable.

(1) Includes 133 full-time and 2 part-time technicians employed by the two Provincial Laboratories of Public Health (Edmonton and Calgary).

(2) Includes 10 combined laboratory and radiological trainee technicians.

(3) Includes 16 dietetic interns.

(4) Includes 8 dietetic interns.

(5) Includes 13 dietetic interns and 8 physiotherapy and occupational therapy interns.

TABLE A23
PERCENTAGE DISTRIBUTION OF TOTAL PERSONNEL⁽¹⁾ IN HOSPITALS LISTED IN HOSPITAL INSURANCE AGREEMENTS,
BY TYPE OF PERSONNEL, BY PROVINCE, 1964

Category	N.F.L.D.	P.E.I.	N.S.	N.B.	QUE.	ONT.	MAN.	SASK.	ALTA.	B.C.	YUKON	N.W.T.	CANADA
EMPLOYEES													
A. Medical	2.5	1.0	1.9	1.9	2.2	1.3	2.0	0.8	0.9	1.9	-	1.5	1.7
B. Nursing													
1 - Graduate Nurses	17.0	22.3	25.7	20.4	17.9	24.2	12.2	22.8	22.5	26.0	32.7	28.7	21.5
2 - Qualified Nursing Assistants	5.8	9.1	7.7	9.6	6.0	7.9	7.4	6.3	10.7	6.0	-	10.4	7.3
3 - Orderlies	3.4	2.4	1.6	3.8	4.5	3.6	3.9	2.8	3.2	4.3	-	0.2	3.8
4 - Other	9.5	3.9	4.8	9.8	11.6	10.8	14.9	12.7	10.3	8.4	-	4.2	10.8
TOTAL	35.7	37.7	39.9	43.7	40.0	46.5	38.4	44.6	46.8	44.8	32.7	43.5	43.4
C. Other Professional and Technical													
1 - Hospital Administrators	1.1	1.1	0.7	0.6	0.4	0.4	0.9	1.4	0.9	0.7	1.9	2.9	0.6
2 - Dietitians	0.2	0.4	0.5	0.5	0.4	0.4	0.4	0.2	0.5	0.6	-	0.2	0.4
3 - Medical Record Librarians	0.1	0.4	0.7	0.5	0.3	0.3	0.5	0.5	0.5	0.4	1.9	0.4	0.4
4 - Laboratory Technicians	2.0	1.2	2.2	0.7	2.2	2.0	1.9	2.0	2.1	2.3	1.2	0.7	2.1
5 - Radiological Technicians	1.1	1.1	1.8	1.4	1.2	1.0	0.7	0.9	0.8	1.0	1.2	0.7	1.0
6 - Combined Laboratory and Radiological Technicians	0.6	0.4	0.1	-	0.2	*	0.2	0.9	0.5	0.1	-	0.4	0.2
7 - Physiotherapists	0.3	1.3	0.3	0.4	0.4	0.6	0.4	0.3	0.6	0.7	-	0.2	0.5
8 - Occupational Therapists	0.1	0.1	0.1	0.1	0.1	0.1	0.3	0.1	0.2	0.1	-	-	0.1
9 - Pharmacists	0.3	0.3	0.3	0.4	0.4	0.4	0.4	0.4	0.4	0.4	0.6	0.2	0.4
10 - Psychologists	-	-	*	*	0.1	0.1	0.1	*	*	*	-	-	0.1
11 - Social Workers	0.1	-	0.2	0.2	0.3	0.1	0.2	0.2	0.1	0.2	-	-	0.2
TOTAL	5.9	6.2	6.8	4.7	6.1	5.4	6.1	6.9	6.5	6.5	6.8	5.7	5.9
D. Other Personnel	38.0	35.7	34.3	34.0	35.6	35.1	39.9	33.4	32.4	35.5	60.5	49.2	35.3
TOTAL EMPLOYEES	82.1	80.6	83.0	84.4	83.9	88.3	86.4	85.7	86.5	88.7	100.0	100.0	86.3
TRAINEES													
A. Medical													
1 - Residents and Senior Interns	0.3	-	0.9	0.9	2.3	0.9	1.2	0.7	0.8	0.9	-	-	1.3
2 - Junior Interns	0.5	0.1	0.7	0.1	0.8	0.4	0.7	0.4	0.3	0.3	-	-	0.5
TOTAL	0.8	0.1	1.6	1.1	3.1	1.3	1.9	1.1	1.1	1.3	-	-	1.8
B. Nursing													
1 - Student Nurses	13.2	17.7	13.4	12.8	9.5	8.6	9.0	10.4	10.1	8.2	-	-	9.5
2 - Nursing Assistants	3.3	1.0	1.2	1.2	3.0	0.7	1.2	1.1	0.8	0.9	-	-	1.5
TOTAL	16.5	18.6	14.6	14.0	12.5	9.3	10.2	11.5	11.0	9.1	-	-	11.0
C. Other Professional and Technical													
1 - Medical Record Librarians	-	-	0.1	-	*	*	*	0.1	0.1	*	-	-	*
2 - Laboratory Technicians	0.3	-	0.4	*	0.1	0.6	0.9	1.1	0.7	0.5	-	-	0.5
3 - Radiological Technicians	0.4	0.7	0.3	0.5	0.4	0.5	0.6	0.5	0.5	0.3	-	-	0.4
TOTAL	0.6	0.7	0.8	0.5	0.5	1.1	1.5	1.7	1.4	0.9	-	-	0.9
TOTAL TRAINEES	17.9	19.4	17.0	15.6	16.1	11.7	13.6	14.3	13.5	11.3	-	-	13.7
TOTAL PERSONNEL	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0

* Less than 0.05.

(1) Part-time employees counted as full-time.

Source: Table A22

TABLE A24

TOTAL PERSONNEL (1) PER 100,000 POPULATION IN HOSPITALS LISTED IN HOSPITAL INSURANCE AGREEMENTS,
BY TYPE OF PERSONNEL, BY PROVINCE, 1964

CATEGORY	Nfld.	P.E.I.	N.S.	N.B.	QUE.	ONT.	MAN.	SASK.	ALTA.	B.C.	Yukon	N.W.T.	CANADA
Employees													
A. Medical	16.3	6.5	15.1	16.7	20.0	11.9	17.1	8.4	7.5	13.2	-	28.0	14.5
B. Nursing													
1 - Graduate Nurses	157.2	200.0	282.2	253.5	211.7	291.8	135.8	269.9	264.9	260.6	331.3	488.0	249.7
2 - Qualified Nursing Assistants	55.0	86.0	87.1	124.5	73.8	101.6	93.1	79.5	131.6	61.9	-	176.0	89.6
3 - Orderlies	32.2	22.4	19.2	50.2	55.7	47.8	52.2	36.5	39.6	45.2	-	4.0	47.2
4 - Others	90.0	36.4	55.0	123.0	140.5	136.8	192.4	157.5	124.7	84.5	-	64.0	130.4
TOTAL	334.4	343.9	443.6	551.2	481.7	578.0	473.6	543.4	560.9	452.1	331.3	732.0	516.9
C. Other Professional and Technical													
1 - Hospital Administrators	8.1	9.3	7.5	7.5	5.2	5.3	11.8	17.3	10.8	6.7	18.8	40.0	7.0
2 - Dietitians	2.0	3.7	5.4	5.8	4.7	5.4	5.2	3.1	5.4	5.8	-	4.0	4.9
3 - Medical Record Librarians	1.4	3.7	8.6	6.3	4.2	4.4	6.7	5.5	6.4	4.3	18.8	8.0	4.8
4 - Laboratory Technicians	19.1	11.2	24.7	8.8	26.9	26.2	25.3	25.8	25.4	23.5	12.5	12.0	25.1
5 - Radiological Technicians	10.6	10.3	20.5	17.7	14.5	12.9	9.5	11.1	9.4	10.0	12.5	12.0	12.9
6 - Combined Laboratory and Radiological Technicians	5.3	3.7	1.0	-	2.5	0.3	2.6	11.6	5.5	0.8	-	8.0	2.2
7 - Physiotherapists	2.9	11.2	3.2	5.2	4.7	6.8	5.1	3.6	7.3	6.6	-	4.0	5.7
8 - Occupational Therapists	0.8	0.9	1.0	1.3	1.3	1.9	3.3	0.8	2.0	1.4	-	-	1.6
9 - Pharmacists	2.6	2.8	3.6	4.7	4.2	4.4	4.6	5.3	3.8	3.4	6.3	4.0	4.2
10 - Psychologists	-	-	0.4	0.3	1.0	0.6	0.7	0.4	0.2	0.2	-	-	0.6
11 - Social Workers	0.6	-	2.0	2.4	3.3	1.6	3.2	2.0	1.3	2.5	-	-	2.3
TOTAL	53.6	56.1	77.8	60.1	72.6	69.8	78.1	86.5	77.4	65.4	68.8	92.0	71.6
D. Other Personnel	357.4	326.2	390.4	437.4	436.7	445.2	515.9	413.3	384.1	350.1	587.5	780.0	426.8
Total Employees	761.5	732.7	926.8	1,065.5	1,010.9	1,104.9	1,084.7	1,051.5	1,030.0	880.8	987.5	1,632.0	1,039.7
Trainees													
A. Medical													
1 - Residents and Senior Interns	2.6	-	10.8	12.5	29.1	11.8	16.1	9.3	9.8	9.8	-	-	16.2
2 - Junior Interns	4.9	0.9	7.6	1.9	9.3	5.6	8.7	4.6	4.1	3.4	-	-	6.4
TOTAL	7.5	0.9	18.4	14.4	38.5	17.4	24.7	13.9	13.8	13.2	-	-	22.6
B. Nursing													
1 - Student Nurses	125.7	168.2	156.3	168.7	119.2	117.1	121.4	135.7	127.2	86.1	-	-	120.2
2 - Nursing Assistants	31.6	9.3	13.7	16.2	37.6	9.8	16.4	14.2	10.6	10.0	-	-	19.3
TOTAL	157.2	177.6	170.0	184.9	156.8	126.9	137.8	149.9	137.8	96.0	-	-	139.5
C. Other Professional and Technical													
1 - Medical Record Librarians	-	-	1.2	-	0.4	0.4	0.3	0.8	1.3	0.3	-	-	0.5
2 - Laboratory Technicians	2.4	-	4.9	0.5	1.4	7.7	11.6	14.3	9.2	5.2	-	-	5.7
3 - Radiological Technicians	3.7	6.5	3.6	6.6	4.7	6.5	7.8	6.7	6.6	3.7	-	-	5.6
TOTAL	6.1	6.5	9.6	7.1	6.6	14.6	19.7	21.8	17.2	9.3	-	-	11.9
Total Trainees	170.9	185.0	198.0	206.5	201.5	158.9	182.3	185.7	168.8	118.5	-	-	174.0
Total Personnel	932.4	917.8	1,124.9	1,272.0	1,212.5	1,263.7	1,266.9	1,237.2	1,198.7	999.3	987.5	1,632.0	1,203.7

1 Two part-time employees counted as one full-time. Items may not add to totals due to rounding.

TABLE A25
PAID HOURS OF WORK, TOTAL AND PER PATIENT-DAY, IN BUDGET REVIEW GENERAL HOSPITALS, BY PROVINCE, 1964.

PROVINCE	Number			Hours per Patient-Day			Patient Days During Year
	Total	Nursing Personnel	Other Personnel	Total	Nursing Personnel	Other Personnel	
Newfoundland	6,812,766	3,917,765	2,895,001	13.25	7.62	5.63	514,299
Prince Edward Island	2,119,122	1,208,092	911,030	12.74	7.26	5.48	166,357
Nova Scotia	15,629,483	8,821,522	6,807,961	13.98	7.89	6.09	1,118,004
New Brunswick	14,406,899	8,630,912	5,775,987	13.98	8.37	5.60	1,030,891
Quebec	110,313,602	57,907,834	52,405,768	15.25	8.00	7.24	7,235,048
Ontario	142,680,680	81,131,956	61,548,724	13.54	7.70	5.84	10,535,095
Manitoba	19,349,293	11,242,665	8,106,628	13.39	7.78	5.61	1,445,015
Saskatchewan	23,626,501	12,936,515	10,689,986	11.91	6.52	5.39	1,983,644
Alberta	29,405,179	17,066,161	12,339,018	12.20	7.08	5.12	2,409,583
British Columbia	31,916,481	18,124,464	13,792,017	11.72	6.66	5.06	2,723,282
Yukon	40,488	22,484	18,004	13.05	7.25	5.80	3,102
Northwest Territories	89,611	42,707	46,904	11.24	5.36	5.88	7,974
CANADA	396,390,105	221,053,077	175,337,028	13.59	7.58	6.01	29,172,294



Annual Report

of the

Minister of National Health and Welfare

on the operation of

Agreements with the Provinces

under the

Hospital Insurance

and

Diagnostic Services Act



for the fiscal year ended March 31, 1967

ANNUAL REPORT

OF THE

MINISTER OF NATIONAL HEALTH AND WELFARE

ON THE OPERATION OF

AGREEMENTS WITH THE PROVINCES

UNDER THE

HOSPITAL INSURANCE AND DIAGNOSTIC SERVICES ACT

FOR THE FISCAL YEAR ENDED

MARCH 31, 1967

INDEX OF TABLES

	<u>Page</u>
TABLE A - Number of Insured Persons, by Province, on March 31, 1967.....	11
TABLE B - Net Population of Canada as Estimated by Dominion Statistician, by Province and Percentage Increase over Previous Year, 1958 to 1966	13
TABLE C - Summary of Payments made by Canada, by Province, 1966-67 Fiscal year	16
TABLE D - Payments by Canada - in each Fiscal Year, by Province July 1, 1958 to March 31, 1967.....	17
TABLE E - Payments by Canada - in respect of each Calendar Year by Province, July 1, 1958 to March 31, 1967	19
TABLE F - Cost of In-Patient Services, 1964; Net Population, June 1, 1964; Total and 25% Per Capita Cost, 1964 by Province	20
TABLE G - Contribution by Canada with respect to In-Patient Services, 1964	21
TABLE H - Contribution by Canada with respect to Out-Patient Services, 1964	22
TABLE J - Total Contributions and Final Payments made by Canada, by Province, with respect to 1964.....	24
TABLE K - Cost of In-Patient Services by Province, 1964.....	25
TABLE L - Per Capita Cost of In-Patient Services, and Percentage Increase over Previous Year, by Province, 1958 to 1964	28
TABLE M - Final Cost of In-Patient Services and Percentage Increase over Previous Year by Province, 1958 to 1964	29

INDEX OF TABLES (Cont'd)

		<u>Page</u>
TABLE 1	- Number of Hospitals and other facilities listed in Hospital Insurance Agreements and reporting, Canada, 1961 - 1965	31
TABLE 2	- Insured Patient-Days excluding Newborn in Hospitals listed in Hospital Insurance Agreements and insured population, Canada and Provinces, 1961 - 1965	32
TABLE 3	- Insured Patient-Days excluding Newborn in Hospitals listed in Hospital Insurance Agreements, rate per 1,000 insured population and index numbers, Canada and Provinces, 1961 - 1965	34
TABLE 4	- Patient-Days excluding Newborn in Hospitals listed in Hospital Insurance Agreements, number and rates per 1,000 population, and number and percentage of patient-days by responsibility for payment, Canada, 1961 - 1965	35
TABLE 5	- Patient-Days excluding Newborn in Hospitals listed in Hospital Insurance Agreements, by status of Hospital and type of accommodation, and percentage distribution by type of accommodation, Canada, 1961 - 1965	36
TABLE 6	- Admissions to Hospitals listed in Hospital Insurance Agreements, number and rates per 1,000 population, Canada and Provinces, 1961 - 1965	38
TABLE 7	- Average Length of Stay excluding Newborn in Hospitals listed in Hospital Insurance Agreements, by status and type of Hospital, Canada, 1961 - 1965	39
TABLE 8	Average Length of Stay excluding Newborn in Budget Review General Hospitals, Canada and Provinces, 1961 - 1965	40

INDEX OF TABLES (Cont'd)

	<u>Page</u>
TABLE 9 - Separations and Patient-Days excluding Newborn since admission by Length of Stay, number and percentage distribution for Patients insured under Provincial Plans, Canada, 1965	41
TABLE 10 - Beds in Hospitals listed in Hospital Insurance Agreements, number and ratio per 1,000 population, Canada and Provinces, 1961 - 1965	43
TABLE 11 - Budget Review General Hospitals by size of Hospital and number of beds, numbers and percentage distributions, Canada, 1961 - 1965	44
TABLE 12 - Beds in Hospitals listed in Hospital Insurance Agreements by status of hospital and number and percentage distribution by type of unit, Canada, 1965	45
TABLE 13 - Average percentage occupancy in Hospitals listed in Hospital Insurance Agreements by status and type of Hospital, Canada, 1961 - 1965	47
TABLE 14 - Average percentage occupancy in Budget Review General Hospitals, Canada and Provinces, 1961 - 1965	48
TABLE 15 - Newborn in Hospitals listed in Hospital Insurance Agreements: Hospitals, Bassinets, Patient-Days, Separations, and Length of Stay, Canada, 1961 - 1965	50
TABLE 16 - Revenue Fund Expenditures of Budget Review Hospitals, Canada and Provinces, 1961 - 1965	51
TABLE 17 - Revenue Fund Expenditure of Budget Review Hospitals per Patient-Day, excluding Newborn, Canada and Provinces, 1961 - 1965	53

INDEX OF TABLES (Cont'd)

	<u>Page</u>
TABLE 18 - Revenue Fund Expenditures of Budget Review Hospitals per capita, Canada and Provinces, 1961 - 1965	54
TABLE 19 - Separations and Days of Care since Admission per 1,000 population, and average length of stay, by age, for Patients insured by Provincial Plans, Canada, 1961 - 1965	56
TABLE 20 - Separations and Days of Care since Admission, number and rates per 1,000 population and average length of stay for Patients insured by Provincial Plans, and population of Canada by sex and age, Canada, 1965	59
TABLE 21 - Ten Leading Diagnostic Categories (Canadian list of 98 diagnoses) among Separations of Patients insured by Provincial Plans, number, rank and percentage distribution, Canada, 1962 - 1965	61
TABLE 22 - Personnel in listed Hospitals, full-time and part-time, Canada and Provinces, 1961 - 1965	63
TABLE 23 - Personnel in listed Hospitals, full-time and part-time by profession, Canada 1965	64
TABLE 24 - Hours of Work in Budget Review Hospitals, Total and per Patient-Day for Nursing and other personnel, Canada, 1961 - 1965	66

INDEX OF APPENDIX TABLES

	<u>Page</u>
TABLE A1 - Patient-Days excluding Newborn in Hospitals listed in Hospital Insurance Agreements by responsibility for payment, Canada and Provinces, 1965	68
TABLE A2 - Patient-Days excluding Newborn in Hospitals listed in Hospital Insurance Agreements by status of Hospital, number and population rates by Province, and percentage distribution by status of Hospital, Canada and Provinces, 1965	70
TABLE A3 - Patient-Days excluding Newborn in Budget Review Hospitals, number and percentage distribution by type of accommodation, Canada and Provinces, 1965	71
TABLE A4 - Separations excluding Newborn in Hospitals listed in Hospital Insurance Agreements, number and rates per 1,000 population, Canada and Provinces, 1961 - 1965	72
TABLE A5 - Average Length of Stay excluding Newborn in Hospitals listed in Hospital Insurance Agreements by status and type of Hospital, Canada and Provinces, 1965	73
TABLE A6 - Percentage Distribution of Patient-Days since Admission by Length of Stay, Canada and Provinces, 1965	75
TABLE A7 - Budget Review General Hospitals and average number of days of care since admission for separations by size of Hospital, Canada and Provinces, 1965	76
TABLE A8 - Hospitals and other facilities listed in Hospital Insurance Agreements by status of Hospital, Canada and Provinces, December 31st, 1965	77
TABLE A9 - Beds in Hospitals listed in Hospital Insurance Agreements by status of Hospital, number and percentage distribution, Canada and Provinces, 1965	78

INDEX OF APPENDIX TABLES (Cont'd)

	<u>Page</u>
TABLE A10 - Budget Review General Hospitals by size of Hospital, number and percentage distribution, Canada and Provinces, 1965.....	79
TABLE A11 - Beds in Budget Review General Hospitals by size of Hospital, number and percentage distribution, Canada and Provinces, 1965	80
TABLE A12 - Beds in Budget Review Hospitals by type of unit, number and percentage distribution, Canada and Provinces, 1965	81
TABLE A13 - Beds in Contract Hospitals and in Federal Hospitals by type of unit, Canada and Provinces, 1965	82
TABLE A14 - Occupancy of Hospitals listed in Hospital Insurance Agreements by status of Hospital, Canada and Provinces, 1965	83
TABLE A15 - Occupancy of Budget Review Hospitals by size of Hospital, Canada and Provinces, 1965	84
TABLE A16 - Newborn Services in Hospitals listed in Hospital Insurance Agreements: Bassinets, Patient-Days, Separations, and Average Length of Stay, Canada and Provinces, 1965.....	85
TABLE A17 - Revenue Fund Expenditures of Budget Review Hospitals, by type of account, Canada and Provinces, 1965 (in dollars)	86
TABLE A18 - Revenue Fund Expenditures of Budget Review Hospitals by type of account, Canada and Provinces, 1965 (dollars per patient-day)	87
TABLE A19 - Revenue Fund Expenditures of Budget Review Hospitals by type of account, Canada and Provinces, 1965 (dollars per capita).....	88

INDEX OF APPENDIX TABLES (Cont'd)Page

TABLE A20	- Revenue Fund Expenditures of Budget Review Hospitals by type of account, Canada and Provinces, 1965 (percentage distribution)	89
TABLE A21	- Diagnoses of Patients insured by Provincial Plans, (Canadian list of 98 diagnoses), Canada, 1965	90
TABLE A22	- Full-time and part-time personnel in Hospitals listed in Hospital Insurance Agreements, by category of employment, Canada and Provinces, 1965	98
TABLE A23	- Personnel in Hospitals listed in Hospital Insurance Agreements, percentage distribution by category of employment, Canada and Provinces, 1965	100
TABLE A24	- Personnel in Hospitals listed in Hospital Insurance Agreements by category of employment, rates per 100,000 population, Canada and Provinces, 1965	101
TABLE A25	- Paid Hours of Work of Nursing and other personnel, Patient-Days and ratios of hours to Patient-Days in Budget Review Hospitals, Canada and Provinces, 1965	102

ANNUAL REPORT
of the
MINISTER OF NATIONAL HEALTH AND WELFARE
on the operation of
Agreements with the Provinces
under the
Hospital Insurance and Diagnostic Services Act
for the fiscal year ended March 31, 1967

This is the ninth report to Parliament required to be made in accordance with Section 9 of the Hospital Insurance and Diagnostic Services Act and it is made with respect to the operation of the Agreements under the Act for the fiscal year ended March 31, 1967.

It should be noted that the data concerning federal contributions, other than the final contribution for 1964, and the number of insured persons as set out in Part I of this report, relate to the fiscal year ended March 31, 1967. The hospital utilization and financial data generally are based on the calendar year and, for this reason, such statistical data concerning the operation of hospitals relate to the calendar year 1965 and are set out in Part II of this report.

Part I of this report also describes the amendments made during the year under review to the federal-provincial Agreements under the Hospital Insurance and Diagnostic Services Act. These amendments have been made in accordance with changes in provincial laws or in provincial administrative arrangements as set out in the Schedules of the Agreements. The activities of the Advisory Committee on Hospital Insurance and Diagnostic Services and the Hospital Services Study Unit are outlined. As in previous years, a description is given of the provisions of provincial programmes as in force at the end of the year under review. Figures are provided concerning the number of persons covered by the hospital insurance programmes at the end of the year under review and the increases in population since the inception of the programme, are shown. It has also been felt that it would be helpful to include in this report, as in previous reports, an outline of the statutory basis for federal contributions and advance payments made to the provinces. The amounts of payments made to the provinces during the fiscal year under review are shown, and some comparative data are given with regard to final costs since the inception of the programme.

Part II of this report contains statistical data derived from the Annual Return of Hospitals for 1965. As explained in previous reports, the Annual Return of Hospitals was designed for a dual purpose: to fulfil the requirements of the Statistics Act in relation to hospital statistics and administered by the Dominion Bureau of Statistics, and to implement the provincial undertakings embodied in the Agreements under the Hospital Insurance and Diagnostic Services Act and administered by the Department of National Health and Welfare.

PART I - Relating to Fiscal Year 1966-67

1. Changes in Legislation and Agreements

There were a few changes in provincial hospital insurance legislation and in the federal-provincial agreements during the year under review.

Nova Scotia extended its out-patient benefits to include pulmonary function tests and inhalation therapy.

New Brunswick amended its legislation to increase maximum out-of-province in-patient payments to \$35.00 per patient-day for adults and children and \$10.00 for newborns. Another amendment also reflected the new method of payments to hospitals in the Province.

Quebec added cytological examinations to its out-patient services and amended its Regulations to change the method of financing shareable equipment. As of January 1, 1967, the Province will transfer to the outright purchase method and make quarterly payments to hospitals; these payments have to be funded by the hospitals and may only be used for the purchase of furniture and equipment approved by the Provincial Minister. A further amendment regulates the financial and statistical reporting of the hospitals to the Province.

Ontario amended legislation affecting Provincial hospital insurance to include hospitals established under the Community Psychiatric Hospitals Act, to redefine classification of its hospitals and admissions to the different categories, to set rates of payment by municipalities for indigents and to give municipalities the right to recover payments to hospitals for indigents under specified circumstances. The Province also amended its legislation to provide capital grants to schools for the education of hospital and related personnel effective June 1, 1966.

Saskatchewan amended its legislation to include admission chest X-rays under hospital insurance and to reflect a reorganization of its hospital insurance administration.

Alberta legislated to increase the amount of authorized charges for in-patients, to change its method of payment to hospitals in the Province and amended its Agreement with the federal government to reflect the method of payment to federal hospitals in the Province.

British Columbia amended its Agreement to include out-patient cancer therapy in specified facilities as an insured service subject to a co-insurance charge of \$1.00 per visit and amended its legislation to delete the time limit on out-of-province in-patient benefits.

The Yukon Territory amended its Agreement to reflect the financial administration of hospitals owned and operated by the Territorial Government.

Most of the provinces also amended their Agreement with the federal government to take into account changes in the listing of hospitals and to indicate change of rates for insured out-patient services.

2. Hospital Services Study Unit

During the year the Hospital Services Study Unit, whose purpose is "... to establish principles which could be incorporated into the planned development of essential health services with cost being kept constantly in mind and balanced against the value of the arrangements in terms of high quality care for the Canadian people", has undertaken projects on its own and assisted in other projects submitted through the provinces.

Funds for projects submitted by the provinces have come from the Public Health Research Grant. In the area of 'applied hospital research' there are now more than 20 projects presently being carried out or in the process of development. Officers of the Hospital Services Study Unit have been working in close cooperation with the provinces in the development and carrying out of these projects.

A number of projects are being carried out by officers of the Hospital Services Study Unit themselves, and reports are submitted to the semi-annual meetings of the Advisory Committee on Hospital Insurance. Close cooperation with members of the Directorate and the Branch has been maintained to ensure an integrated approach.

The officers of the Hospital Services Study Unit also have been endeavouring to promote interest in 'applied research' in the hospital field, at universities, colleges and technical institutes, as well as national organizations. Studies presently underway have already influenced procedures in hospitals, thus increasing their operational efficiency.

During the last year representatives of other countries, who have been aware of the developing activities of the Study Unit, have visited with officers of the Unit in order to exchange information concerning studies presently being carried out in Canada.

The staff of the Hospital Services Study Unit now consists of three officers and a coordinator. Recruitment to fill the vacant positions is being maintained.

3. Advisory Committee on Hospital Insurance and Diagnostic Services

The Advisory Committee held two meetings in Ottawa during the year under review, one on May 24 and 25 and the other on October 27 and 28, 1966. The provinces exchanged ideas relating to technical and administrative problems and new trends affecting hospital insurance.

Discussions covered important topics such as the effect of the Health Resources Fund and Medical Care Insurance on hospital insurance, costs of nursing education, home-care programmes, the revision of hospital reporting forms, and the relation of the medical profession with hospital insurance.

The Advisory Committee approved the establishment of the Hospital Insurance Supplementary Fund, a central fund for the payment of hospital accounts of residents who, through no fault of their own, had lost hospital insurance coverage.

Meetings of the three Sub-committees of the Advisory Committee were held in February 1967 to deal with problems of residence, finance and statistics.

The Hospital Services Study Unit reported on its activities and the Advisory Committee heard reports by the Canadian Red Cross Society and other agencies interested in hospital insurance.

4. Summary of Provincial Programmes

Because of the variation in programmes provided by the provinces in accordance with agreements under the Hospital Insurance and Diagnostic Services Act, it has been the practice to include in this report a summary of provincial programmes as at the end of the fiscal year under review.

(a) In-Patient Services

Since it is a primary requisite for entering into an agreement under the federal Act that a province provide, on uniform terms and conditions, the in-patient services specified in the federal law, all of the provinces provide the following as insured in-patient services:

- (i) accommodation and meals at the standard or public ward level,
- (ii) necessary nursing service,
- (iii) laboratory, radiological and other diagnostic procedures together with the necessary interpretations for the purpose of maintaining health, preventing disease and assisting in the diagnosis and treatment of any injury, illness or disability,
- (iv) drugs, biologicals and related preparations as provided in an agreement,
- (v) use of operating room, case room and anaesthetic facilities, including necessary equipment and supplies,
- (vi) routine surgical supplies,
- (vii) use of radiotherapy facilities where available,
- (viii) use of physiotherapy facilities where available,
- (ix) services rendered by persons who receive remuneration therefor from the hospital, and
- (x) such other services as are specified in an agreement.

(b) Out-Patient Services

While the federal law authorizes the Minister of National Health and Welfare to enter into an agreement to make contributions towards the costs of the above services on an out-patient basis as well, the law is permissive in this regard and the provinces are free to choose which, if any, out-patient services they propose to provide as insured services. At the end of the fiscal year under review, the following was the situation with regard to insured out-patient services:

In the agreement with British Columbia, only out-patient cancer therapy in specified facilities is listed as an insured service. Nevertheless, emergency services and minor surgical procedures are included in the provincial programme on payment of a \$2 charge.

A common feature of out-patient services provided in most of the provinces, is the provision of a fairly broad range of services in the specific event of an accident. In Ontario, these are provided within a period of 24 hours after an accident (Ontario also provides follow-up care in fracture cases), while this period may be extended in Manitoba, Quebec, the Northwest Territories and the Yukon. In Nova Scotia and New Brunswick, emergency services are provided within a period of 48 hours of an accident, and follow-up care is included for a period of 90 days after an accident in New Brunswick.

In addition to these out-patient services provided for emergencies, most provinces now provide an increasing number and widening range of other out-patient services.

The Northwest Territories provide certain diagnostic procedures and necessary interpretations.

Alberta insured services include the services of the Provincial Cancer Clinics and the Provincial Laboratories and all services normally provided by a hospital to in-patients, including radiotherapy and physiotherapy where available. All out-patient services are subject to a 20% co-insurance charge payable by the patient.

In Saskatchewan, insured out-patient services include the services provided by a hospital in the course of providing diagnostic or treatment services, to the extent that these can be provided. All radiological and laboratorial procedures and all physiotherapy and occupational therapy procedures are also insured out-patient services to the extent that these can be provided by the participating hospitals.

Manitoba provides surgical procedures, as designated; certain procedures related to medical rehabilitation and electro-shock therapy; the services provided through and by the Manitoba Cancer Treatment and Research Foundation; and the services provided by the preschool development clinic administered by the Children's Hospital of Winnipeg

Ontario provides certain medical and therapeutic procedures in cases where the procedure ordinarily would be carried out as an in-patient service, in specified hospitals. Out-patient services also include the use of radiotherapy for treatment of cancer, and the use of occupational therapy, physiotherapy and speech therapy facilities in specified hospitals.

Quebec provides minor surgical procedures as specified from time to time, including necessary radiological and laboratory examinations which are directly related to these procedures, along with the examination of tissues together with the necessary interpretations. Quebec out-patient services also include psychiatric day care and night care in psychiatric departments of certain specified hospitals. Electro-shock and insulin shock therapy are insured services when provided in psychiatric departments of general hospitals in the Province.

In addition, audiology, speech therapy, medical orthoptics, occupational therapy and cytological examinations are now covered under the plan as are prescribed radiotherapy and physiotherapy treatments in recognized hospitals.

In New Brunswick, hospital services and facilities when provided for diagnostic and treatment procedures as authorized from time to time, including the use of the operating room, the use of surgical equipment and supplies, drugs and related preparations and laboratory, radiological and other diagnostic procedures together with the necessary interpretations are all insured out-patient services. Laboratory procedures when referred by a physician are insured services where approved facilities are available. Physiotherapy facilities where available are included as insured out-patient services.

Radiotherapy is provided for proven cases of cancer and electro-shock therapy is an insured service where available. Basal metabolic rate, E. C. G. and E. E. G. with interpretations are also insured under the programme.

Nova Scotia provides a wide range of out-patient services. The services of the tumour clinic and laboratory tests from time to time specified by the Commission, together with necessary interpretations, are insured. The Province also includes as insured out-patient services all medically necessary diagnostic radiological examinations. In addition, treatment facilities where available are insured for radiotherapy and physiotherapy. Minor medical and surgical procedures and the provision of blood including blood fractions, are also insured out-patient services. Other insured services include diabetic day care clinics, pulmonary function tests and inhalation therapy.

Prince Edward Island provides laboratory and radiological procedures as specified, including the use of radioactive isotopes; drugs, biologicals and related preparations for emergency diagnosis and treatment; and all of the other services prescribed as in-patient services in the federal Act.

In Newfoundland, selected diagnostic and treatment procedures are provided as insured out-patient services, including psychiatric day care in two hospitals.

(c) Methods of Provincial Financing

Since the provinces were free to devise their own methods for financing the provincial share of costs, a variety of methods of financing has emerged. Five provinces initially used a premium method, but two of those subsequently switched to general revenue; one province levies a sales (hospital) tax while another levies a property tax. Other provinces finance their share of costs out of general revenue and, in some instances, a combination of methods is used.

The premium method is used in Saskatchewan, Manitoba and Ontario. It had been used in New Brunswick and Prince Edward Island but it was abolished in the former from January 1, 1961 and the latter from December 1, 1962.

The annual premium, or hospitalization tax as it is called, in Saskatchewan is \$24 and \$48 for single persons and families respectively. The funds derived from the hospitalization tax are augmented by general revenue funds.

The Manitoba monthly premium for single persons and families is \$2.00 and \$4.00 respectively. A 6% charge on personal income tax and an extra 1% tax on taxable income of corporations, are levied to provide for the provincial costs not covered by the premiums. A compulsory payroll deduction is applied for employed groups of three or more persons. Provision is also made to exempt from this group certain categories of persons for such reasons as temporary or part-time employment.

The Ontario monthly premium is \$3.25 for single persons and \$6.50 for families. Insured persons in Ontario are entitled to insured services and, in addition, to services over and above those included in the agreement under the Hospital Insurance and Diagnostic Services Act. The provincial programme in that Province includes insured services in mental hospitals and tuberculosis sanatoria. There is a compulsory payroll deduction clause in the Ontario law in relation to establishments of fifteen or more employees including the employer. Unlike the majority of provinces, this category of residents is the only category with respect to whom insurance coverage is compulsory in the Province, the programme being available to all others on a voluntary basis.

In all the premium provinces, reduced premium rates are levied with respect to the families of armed services personnel and members of the Royal Canadian Mounted Police.

British Columbia finances the provincial share of costs out of the general revenue of the Province (part of a provincial sales tax in British Columbia is paid into the general revenue fund for hospital insurance). A similar method of financing is used in Quebec, New Brunswick, Prince Edward Island, Newfoundland, the Yukon and the Northwest Territories. Both British Columbia and the Northwest Territories supplement this source of revenue by the levy of authorized charges discussed below. Alberta raises a portion of its share of costs from a mill rate levied on property, as well as levying an authorized charge. Nova Scotia finances its programme through a five per cent sales tax.

Three Provinces, Alberta, British Columbia and the Northwest Territories have included in their Agreement provisions for levying charges directly to patients for insured services. These deterrent or co-insurance charges are described in the law as authorized charges. In Alberta, in-patients are charged \$5.00 for the first day and \$2.50 for each succeeding day of hospitalization in general hospitals and \$1.50 per day in auxiliary hospitals. A co-insurance charge of 20% is paid by the patient for out-patients services. British Columbia has an authorized charge of \$1.00 per day for in-patients and out-patients pay \$1.00 per visit for cancer therapy, in addition to the \$2.00 per visit charge for emergency services. The latter charge is not included in the cost of insured services.

5. Number of Insured Persons

The methods for determining the number of insured persons in a province and outlined in the Agreements, differ since the method used by a province to finance the provincial share of costs has a direct bearing on the availability of an actual count of insured persons. In the three Provinces which levy premiums, Ontario, Manitoba and Saskatchewan, insured persons are registered and identification certificates are provided. However, even in these circumstances the methods of registration differ. In Ontario and Manitoba, registration is for single persons and for the family head, but no actual count of the number of dependents of the family head is made. In order therefore, to calculate the average number of persons in the province who are eligible for and entitled to insured services, a number which is required in connection with the federal contributions to the provinces, an estimate of the average number of dependents in these two provinces is made by the Dominion Statistician. In Saskatchewan the registration method used by the Province consists of a head count including dependents.

Coverage is automatic or compulsory in all provinces except Ontario where persons employed in an undertaking having a total of 15 or more employed persons are the only mandatory groups, coverage being voluntary for the remaining population.

In provinces where no premiums are levied and where the provincial share of costs is paid out of general revenue, sales or property tax, no individual registration of insured persons is required and coverage is universal. Insofar as these provinces are concerned, provision was made in the Agreements for calculation of the number of insured persons on the basis of a population estimate for a given date in the year (June 1) as determined by the Dominion Statistician.

The Hospital Insurance Regulations define "population" to mean the population of Canada or of the province, as certified by the Dominion Statistician, and, calculated for a calendar year in which a census was taken, as the population of Canada or of the province as ascertained by the census; for other than a census year, the population of Canada or of the province on the 1st day of June in that year according to published original intercensal estimates of the Dominion Statistician.

There are certain categories of persons with respect to whom hospital services are provided under a statute other than the hospital insurance legislation, and who are, therefore, not entitled to insured services. For the most part, these consist of members of the Armed Forces and the Royal Canadian Mounted Police. In addition, inmates of federal penitentiaries are provided with hospital services by the federal government. In the Dominion Bureau of Statistics population estimates, therefore, the number of the members of the regular forces, members of the Royal Canadian Mounted Police and persons serving terms of imprisonment in a federal penitentiary, amounting to some .6% of the total population, are deducted so as to provide a "net" population figure for the purpose of calculating the eligible population.

Table A shows by province, the number of insured persons on March 31, 1967 as reported for purposes of advance payments, the advance estimate of net population as of June 1, 1967 as certified by the Dominion Statistician and the percentage of insured persons to the total net population at the end of the fiscal year under review. It will be noted that in all but three provinces, all of the net population was entitled to insured services at the end of the year.

At the end of the year under review coverage was compulsory or automatic in all provinces with the exception of Ontario, as noted above. Nevertheless, in spite of the partially voluntary aspect of that programme, 97.6% of the net population was insured at the end of the year under review.

TABLE A

NUMBER OF INSURED PERSONS, BY PROVINCE, ON MARCH 31, 1967

PROVINCE	Number of Insured Persons March 31, 1967	Advance Estimate of Net Population June 1, 1967	Percentage of Persons Insured
Newfoundland	499,000	499,000	100
Prince Edward Island	107,000	107,000	100
Nova Scotia	739,000	739,000	100
New Brunswick	610,000	610,000	100
Quebec	5,841,000	5,841,000	100
Ontario	6,940,698	7,115,000	97.6
Manitoba	945,000	950,000	99.5
Saskatchewan	946,810	952,000	99.5
Alberta	1,475,000	1,475,000	100
British Columbia	1,951,000	1,951,000	100
Yukon	14,000	14,000	100
Northwest Territories	29,000	29,000	100
CANADA	20,097,508	20,282,000	99.1

The percentage of insured persons in Canada on March 31, 1967 to net population, has increased steadily since the inception of a hospital insurance plan. The decrease in insured population in 1967 is due to an adjustment of population based on the national census of 1966 for which final figures are not available. In the early years of the programme the large increases were due to the increasing number of provinces participating in the joint programme. However, since 1961, the increases represent increases in the number of persons covered in provinces already participating in the plan. The percentages of insured persons to net population at the end of each of the fiscal years since the inception of the programme, are as follows:

March 31, 1959	64.5%
March 31, 1960	67.6%
March 31, 1961	97.7%
March 31, 1962	98.2%
March 31, 1963	98.6%
March 31, 1964	99.1%
March 31, 1965	99.3%
March 31, 1966	99.3% *
March 31, 1967	99.1%

Table B shows, by province, the net population of Canada as estimated by the Dominion Statistician and the percentage increase from year to year, from 1958 to 1966. It will be noted that the net population of Canada increased from 16,918,000 to 19,797,000 during these eight years. The population increase, totalling 2,879,000 persons, represents a 17.0% increase.

On an annual basis, the increase for Canada has averaged approximately 2% and it will be noted that increases have been recorded in most years in individual provinces.

6. Formula For Federal Contributions

The amount of the federal contributions to the provinces is calculated on the basis of a formula contained in the Hospital Insurance and Diagnostic Services Act. It has been designed in such a way as to provide greater federal assistance to those provinces in which the per capita cost of hospital care is lower and to provide for an equitable federal contribution to the provinces, having regard to the considerable variation in the per capita costs between the provinces.

The federal contribution as set out in the Act, is the aggregate in the year of twenty-five per cent of the per capita cost of in-patient services in Canada, that is the national per capita cost, and twenty-five per cent

* Increase of 1966 over 1965 was less than .1%

TABLE B

NET POPULATION OF CANADA AS ESTIMATED BY DOMINION STATISTICIAN, BY PROVINCE
AND PERCENTAGE INCREASE OVER PREVIOUS YEAR, 1958 TO 1966

	1958	1959		1960		1961*		1962		1963		1964		1965		1966**	
	Population	Population	%	Population	%	Population	%	Population	%	Population	%	Population	%	Population	%	Population	%
Nfld.	436,000	448,000	2.8	457,000	2.0	456,265	-0.2	468,000	2.6	479,000	2.4	490,000	2.3	497,000	1.4	504,000	1.4
P.E.I.	99,000	101,000	2.0	102,000	1.0	103,531	1.5	105,000	1.4	105,000	-	106,000	1.0	106,000	-	107,000	0.9
N.S.	691,000	696,000	0.7	702,000	0.9	716,552	2.1	724,000	1.0	734,000	1.4	739,000	0.7	742,000	0.4	742,000	-
N.B.	571,000	583,000	2.1	593,000	1.7	590,015	-0.5	600,000	1.7	606,000	1.0	609,000	0.5	615,000	1.0	619,000	0.7
Que.	4,866,000	4,980,000	2.3	5,087,000	2.1	5,240,328	3.0	5,346,000	2.0	5,450,000	1.9	5,546,000	1.8	5,640,000	1.7	5,728,000	1.6
Ont.	5,759,000	5,908,000	2.6	6,046,000	2.3	6,192,034	2.4	6,294,000	1.6	6,402,000	1.7	6,540,000	2.2	6,688,000	2.3	6,855,000	2.5
Man.	859,000	874,000	1.7	888,000	1.6	911,476	2.6	924,000	1.4	939,000	1.6	947,000	0.9	952,000	0.5	948,000	-0.4
Sask.	885,000	899,000	1.6	907,000	0.9	921,447	1.6	927,000	0.6	930,000	0.3	939,000	1.0	947,000	0.9	950,000	0.3
Alta.	1,190,000	1,232,000	3.5	1,272,000	3.2	1,320,844	3.8	1,358,000	2.8	1,393,000	2.6	1,420,000	1.9	1,440,000	1.4	1,454,000	1.0
B.C.	1,530,000	1,556,000	1.7	1,594,000	2.4	1,615,707	1.4	1,645,000	1.8	1,681,000	2.2	1,724,000	2.6	1,775,000	3.0	1,849,000	4.2
Yukon	12,000	13,000	8.3	13,000	-	14,161	8.9	14,000	-1.1	15,000	7.1	15,000	-	15,000	-	15,000	-
N.W.T.	20,000	20,000	-	21,000	5.0	22,264	6.0	24,000	7.8	24,000	-	25,000	4.2	25,000	-	26,000	4.0
CANADA	16,918,000	17,310,000	2.3	17,682,000	2.1	18,104,624	2.4	18,429,000	1.8	18,758,000	1.8	19,100,000	1.8	19,442,000	1.8	19,797,000	1.8

* Census Year.

** Preliminary estimate — census figures not available.

of the per capita cost of in-patient services in the province less the amount of authorized charges, multiplied by the average for the year of the number of insured persons in the province.

The effect of this formula is that the high-cost provinces receive a lower percentage of their costs from the federal government than do the low-cost provinces. The inclusion in the formula of the national per capita cost, however, acts as a deterrent to all provinces, as increases or decreases in provincial in-patient costs change the federal contribution directly by only twenty-five per cent, the remaining twenty-five per cent federal contribution being spread over all provinces through the national per capita.

Since the federal contribution is calculated on an annual basis, provision was made in the Hospital Insurance Regulations for advances on account of contributions, so that the provinces would not be required to wait for reimbursement of the amounts which they are required to pay to hospitals on a continuing basis. In order to expedite the payment of advances and, at the same time, to forestall the likelihood of a major financial adjustments after the end of the year, the formula which is used for the calculation of the advance, provides for a small holdback of the amount due to the province. The formula for the advance, therefore, differs from the formula for the annual contribution in that twenty-three and one-half per cent of the per capita cost of in-patient services in Canada is paid (was twenty-two per cent prior to January 1, 1962 when it was altered in accordance with the amendment to the Hospital Insurance Regulations discussed in previous Reports) instead of twenty-five per cent provided for in the annual calculation, and the amount of the advance unlike the amount of the contribution itself, is calculated on the basis of provincial payments, which may or may not be shareable costs as defined in the law.

Since the amount of the federal payment is calculated on a formula which includes the per capita cost of hospital care in Canada, continuing studies are carried out to ensure that this figure maintains accuracy in an area where costs are subject to fluctuations. Changes in the national per capita cost are made, subject to the approval of Treasury Board, at varying intervals as the situation requires. The purpose of making periodic adjustments in the national per capita is to maintain realistic advance payments and to eliminate major adjustments in the calculations of the federal contribution.

The costs which are shareable by the federal government are described in the federal legislation. The Act specifically excludes from shareable costs amounts expended on the capital cost of land, buildings or physical plant; on the payment of any capital debt or interest related to capital debt; on the payment of debt incurred prior to the coming into force of the agreement or on the interest related to such prior debt; or any provision for depreciation on the value of land,

buildings or physical plant. The term "physical plant" is defined in the Regulations as excluding furniture and movable equipment, or non-movable equipment specially required for use in a hospital. Thus, these items are shareable.

In this connection, it should be noted that most of the capital items which are, by definition, excluded from shareable costs, such as the costs of construction and other matters pertaining to physical plant, are supported by the federal government through the National Health Grants programme and particularly through the Hospital Construction grant.

Generally speaking, shareable costs are the operating costs of the hospital which have been approved by the provincial authority and which have been determined in accordance with recognized and generally accepted accounting principles and procedures. The operating costs of a hospital as defined in the Regulations, however, specifically exclude some items which, although provided in or in connection with the hospital, are not considered to be an integral part of the operation of the hospital.

The province is required to review and approve as a basis of payment the costs of each hospital, and these approved costs form the basis of the federal sharing formula.

7. Federal Payments

During the year under review, payments to the provinces consisted of the regular monthly advance payments on a current basis and the payment of the final contribution based on shareable costs for the calendar year 1964. For reasons similar to those described in the last Report, the Governor-in-Council authorized a special further advance on account of the contributions for 1964 to the provinces, payable on the submission of acceptable final cost reports. The final payment of the federal contribution for 1964 was completed in March 1967.

Table C is the summary of payments by Canada to participating provinces during the fiscal year under review. It includes advance payments on contributions for the 1966-67 fiscal year, and the final payment on contributions for the 1964 calendar year.

The total payments to the provinces for the year under review were \$385,285,975.81 as advance payments and \$12,104,407.07 as final payments making a total of \$397,390,382.88.

Table D shows the total payments by fiscal year, to participating provinces since the inception of the hospital insurance programme on July 1, 1958, totalling over two and one-half billion dollars. It should be recalled that in 1958-59, only five provinces (Newfoundland, Manitoba, Saskatchewan, Alberta and British Columbia) participated at the beginning

TABLE C

SUMMARY OF PAYMENTS MADE BY CANADA, BY PROVINCE,
1966-67 FISCAL YEAR

PROVINCE	Advance Payments			Final Payments*	Total Payments
	In-Patient	Out-Patient	Total		
Newfoundland	\$ 11,947,730.98	\$ 705,502.10	\$ 12,653,233.08	\$ 397,781.15	\$ 13,051,014.23
Prince Edward Island	2,357,304.53	314,317.88	2,671,622.41	60,383.50	2,732,005.91
Nova Scotia	18,570,864.48	1,437,868.89	20,008,733.37	504,905.24	20,513,638.61
New Brunswick	15,668,492.91	561,801.75	16,230,294.66	448,065.29	16,678,359.95
Quebec	-	-	-	4,029,615.29	4,029,615.29
Ontario	187,202,449.41	3,900,324.08	191,102,773.49	3,590,204.91	194,692,978.40
Manitoba	24,735,809.44	944,322.53	25,680,131.97	518,827.59	26,198,959.56
Saskatchewan	25,931,648.67	1,829,287.26	27,760,935.93	837,095.42	28,598,031.35
Alberta	38,673,002.31	2,553,648.81	41,226,651.12	715,953.43	41,942,604.55
British Columbia	46,700,425.64	136,800.00	46,837,225.64	984,063.08	47,821,288.72
Yukon	359,685.70	4,522.72	364,208.42	- 4.86	364,203.56
Northwest Territories	727,740.59	22,425.13	750,165.72	17,517.03	767,682.75
CANADA	\$372,875,154.66	\$12,410,821.15	\$385,285,975.81	\$12,104,407.07	\$397,390,382.88

* Final payments for the 1964 calendar year

TABLE D

PAYMENTS BY CANADA - IN EACH FISCAL YEAR, BY PROVINCE
JULY 1, 1958 TO MARCH 31, 1967

PROV.	1958-59	1959-60	1960-61	1961-62	1962-63	1963-64	1964-65	1965-66	1966-67	TOTAL
	\$	\$	\$	\$	\$	\$	\$	\$	\$	\$
Nfld.	2,857,886.84	4,707,692.94	5,094,934.21	6,258,287.26	7,472,463.28	8,724,909.88	9,623,951.21	11,649,657.78	13,051,014.23	69,440,797.63
P.E.I.	-	447,338.27	1,010,806.54	1,381,894.39	1,673,681.11	1,922,524.26	2,102,585.78	2,436,076.68	2,732,005.91	13,706,912.94
N.S.	1,572,782.64	8,163,540.78	9,595,387.52	11,872,932.01	13,519,974.70	15,174,842.90	15,902,172.05	18,078,038.58	20,513,638.61	114,392,309.79
N.B.	-	4,575,374.90	7,914,412.71	9,546,774.26	10,894,711.87	12,611,337.91	13,750,895.84	14,919,440.31	16,678,359.95	90,891,307.75
Que.	-	-	13,936,740.72	73,022,517.78	88,713,635.41	113,848,887.58	95,998,751.05	5,299,733.76	4,029,615.29	394,849,831.59
Ont.	13,140,213.12	71,892,833.66	84,484,271.86	104,498,880.55	122,103,382.61	136,039,776.87	151,477,498.15	171,899,251.27	194,692,978.40	1,050,229,086.49
Man.	7,148,534.97	11,324,466.35	13,048,916.19	15,245,924.23	17,348,934.08	19,664,963.78	20,947,876.73	23,131,484.98	26,198,959.56	154,060,060.87
Sask.	8,430,441.93	13,378,379.43	14,453,463.99	15,953,810.19	18,278,458.50	21,312,084.05	23,526,106.20	25,868,645.55	28,598,031.35	169,799,421.19
Alta.	8,774,575.68	15,698,727.86	16,905,597.57	19,730,547.07	25,784,973.30	28,310,623.43	31,447,963.95	36,859,944.96	41,943,604.55	225,455,558.37
B.C.	12,784,038.88	20,406,091.56	22,493,438.52	25,697,550.94	30,049,147.43	33,687,396.64	36,057,502.19	40,545,529.34	47,821,288.72	269,541,984.22
Yukon	-	-	168,683.75	296,036.35	310,267.36	349,443.34	307,577.82	356,797.56	364,203.56	2,153,009.74
N.W.T.	-	-	261,849.89	377,941.52	523,148.02	597,444.71	579,608.16	721,748.44	767,682.75	3,829,423.49
CANADA	54,708,474.06	150,593,445.75	189,368,503.47	283,883,096.55	336,672,777.67	392,244,235.35	401,722,489.13	351,766,349.21	397,390,382.88	2,558,349,754.07

of the programme, while two additional provinces (Nova Scotia and Ontario) operated programmes for three months only. These seven provinces were joined during the fiscal year 1959-60, by two other provinces which operated programmes for only part of that fiscal year (New Brunswick from July 1 and Prince Edward Island from October 1). During the fiscal year 1960-61 the remaining provinces commenced to participate in the programme (Northwest Territories, April 1, 1960; Yukon, July 1, 1960; and Quebec, January 1, 1961). The fiscal year 1961-62 was the first year during which all of the provinces were participating for the full fiscal year.

Factors which must be considered in connection with the payments shown in this Table are the increase in the number of hospital beds which are being made available to meet the needs of an increasing population; and increasing hospital costs due to readjustments in salaries and wages which form a substantial percentage of overall hospital expenditures.

Table E shows the total contributions by province, by calendar year instead of by fiscal year as was shown in Table D. As explained earlier hospital insurance contributions are calculated on the basis of the calendar year. It will be noted that the amounts shown for 1958 to 1964 represent both advance payments and final payments. The amounts shown for 1965 and 1966 represent advance payments only and the amounts shown for 1967 represent advance payments for the first three months of that calendar year ended March 31, 1967.

8. Final Contribution for 1964

The final contributions payable for 1964 and paid during the fiscal year under review were calculated on the basis of the formula set out in the Hospital Insurance and Diagnostic Services Act and described above. The per capita cost of in-patient services in 1964 is shown in Table F. It will be noted that the national per capita cost was \$43.52 and that in four provinces the cost exceeded this national figure. As a result, in these provinces the federal contribution represented a percentage of less than 50%, whereas the provinces in which the per capita cost was less than the national, received contributions exceeding 50% of their costs.

Table G shows the total contribution for in-patient services in 1964 as calculated in the formula described above. The total contribution of over \$410 million was made to the provinces, all being participating provinces.

Table H shows the amount of the federal contribution made for out-patient services in 1964. The scope of out-patient services, as evidenced in this Table, varies considerably between provinces. The national cost of out-patient services in 1964 increased by 22% over 1963 as compared

TABLE E
PAYMENTS BY CANADA - IN RESPECT OF EACH CALENDAR YEAR, BY PROVINCE
JULY 1, 1958 TO MARCH 31, 1967

PROV.	Payments by Canada										Advances on Contributions		
	Total Contributions										1965	1966	1967
	1958	1959	1960	1961	1962	1963	1964	1965	1966	1967			
	\$	\$	\$	\$	\$	\$	\$	\$	\$	\$	\$	\$	\$
Nfld.	1,990,135.23	4,788,013.82	5,603,586.29	6,185,656.98	7,043,349.59	8,052,704.58	9,561,035.91	11,095,410.75	12,449,231.14	2,671,673.34			
P.E.I.	—	235,524.49	1,146,084.16	1,312,097.61	1,509,060.68	1,888,459.30	2,098,661.51	2,270,719.80	2,597,620.91	648,684.49			
N.S.	—	8,149,539.76	9,991,458.82	11,569,797.35	12,867,987.74	14,287,102.03	15,965,999.37	17,183,104.26	19,324,907.06	5,052,413.40			
N.B.	—	3,331,614.19	7,409,672.94	9,720,034.19	10,987,945.69	12,028,950.31	13,410,238.57	14,089,621.44	15,590,377.85	4,322,852.57			
Que.	—	—	—	77,241,386.65	90,370,182.25	106,052,520.98	121,185,791.71	—	—	—			
Ont.	—	72,495,107.96	86,597,900.15	99,986,577.72	115,404,446.25	130,981,226.31	148,104,309.65	162,195,115.76	184,975,762.62	49,488,640.07			
Man.	4,779,865.66	11,556,009.75	13,229,363.97	15,053,607.08	16,693,750.81	18,631,071.02	20,541,234.36	22,132,041.79	24,599,445.96	6,843,670.47			
Sask.	5,775,875.67	13,276,380.46	14,893,775.21	16,055,698.34	17,678,472.09	20,412,926.34	23,015,747.02	24,509,532.70	27,136,546.18	7,044,467.18			
Alta.	6,494,722.50	15,345,668.80	18,200,793.60	20,758,780.56	23,490,819.80	26,992,351.64	30,350,922.57	33,435,730.65	40,440,742.88	9,945,025.37			
B.C.	8,609,463.00	20,033,811.20	23,309,699.60	26,075,248.99	28,755,093.50	31,837,299.50	35,008,061.20	38,935,761.63	44,556,293.39	12,421,252.21			
Yukon	—	—	124,314.31	288,978.79	321,057.29	310,920.14	329,288.48	321,772.15	354,045.19	102,633.39			
N.W.T.	—	—	208,049.96	391,527.84	481,149.26	564,340.32	580,146.48	674,619.78	718,347.64	211,242.21			
CANADA	27,650,062.06	149,211,670.43	180,714,699.01	284,639,392.10	325,803,314.95	372,039,872.47	420,151,436.83	326,843,430.71	372,743,320.82	98,752,554.69			
Cumulative Total	27,650,062.06	176,861,732.49	357,576,431.50	642,215,823.60	967,819,138.55	1,339,859,011.02	1,760,010,447.85	2,086,883,878.56	2,459,597,199.38	2,558,349,754.07			

TABLE F

COST OF IN-PATIENT SERVICES 1964; NET POPULATION, JUNE 1, 1964;
TOTAL AND 25% PER CAPITA COST, 1964, BY PROVINCE

PROVINCE	Cost of In- Patient Services 1964	Net Population June 1 1964	Per Capita Cost	
			Total 1964	25%
Newfoundland	\$ 15,122,467.25	490,000	\$30.8622	\$ 7.7156
Prince Edward Island	3,115,748.40	106,000	29.3939	7.3485
Nova Scotia	27,381,937.96	739,000	37.0527	9.2632
New Brunswick	25,929,875.63	609,000	42.5778	10.6445
Quebec	236,674,069.19	5,546,000	42.6747	10.6687
Ontario	305,658,845.00	6,540,000	46.7368	11.6842
Manitoba	38,540,518.00	947,000	40.6975	10.1744
Saskatchewan	44,921,699.89	939,000	47.8399	11.9600
Alberta	64,203,777.93	1,420,000	45.2139	11.3035
British Columbia	67,847,960.47	1,724,000	39.3550	9.8388
Yukon	651,119.65	15,000	43.4080	10.8520
Northwest Territories	1,241,075.32	25,000	49.6430	12.4108
CANADA	\$831,289,094.69	19,100,000	\$43.5230	\$10.8808

TABLE G

CONTRIBUTION BY CANADA WITH RESPECT TO IN-PATIENT SERVICES, 1964

PROVINCE	25% of National Per Capita	25% of Provincial Per Capita	Less 25% Per Capita Authorized Charges	Aggregate Per Capita Cost	Average Number of Insured Persons	In-Patient Contribution by Canada
Newfoundland	\$10.8808	\$ 7.7156	-	\$18.5964	490,000	\$ 9,112,236.00
Prince Edward Island	10.8808	7.3485	-	18.2293	106,000	1,932,305.80
Nova Scotia	10.8808	9.2632	-	20.1440	739,000	14,886,416.00
New Brunswick	10.8808	10.6445	-	21.5253	609,000	13,108,907.70
Quebec	10.8808	10.6687	-	21.5495	5,546,000	119,513,527.00
Ontario	10.8808	11.6842	-	22.5650	6,435,855	145,225,068.08
Manitoba	10.8808	10.1744	-	21.0552	944,108	19,878,382.76
Saskatchewan	10.8808	11.9600	-	22.8408	932,909	21,308,387.89
Alberta	10.8808	11.3035	\$1.0279	21.1564	1,420,000	30,042,088.00
British Columbia	10.8808	9.8388	0.4133	20.3063	1,724,000	35,008,061.20
Yukon	10.8808	10.8520	-	21.7328	15,000	325,992.00
Northwest Territories	10.8808	12.4108	0.6533	22.6383	25,000	565,957.50
Total Contributions By Canada for In-Patient Services, 1964						\$410,907,329.93

TABLE H

CONTRIBUTION BY CANADA WITH RESPECT TO OUT-PATIENT SERVICES, 1964

PROVINCE	In-Patient Contribution	In-Patient Cost Less Authorized Charges	Out-Patient Cost	Out-Patient Contribution
Newfoundland	\$ 9,112,236.00	\$ 15,122,467.25	\$ 744,818.50	\$ 448,799.91
Prince Edward Island	1,932,305.80	3,115,748.40	268,240.43	166,355.71
Nova Scotia	14,886,416.00	27,381,937.96	1,985,775.81	1,079,583.37
New Brunswick	13,108,907.70	25,929,875.63	596,042.94	301,330.87
Quebec	119,513,527.00	236,674,069.19	3,311,605.84	1,672,264.71
Ontario	145,225,068.08	305,658,845.00	6,060,012.00	2,879,241.57
Manitoba	19,878,382.76	38,540,518.00	1,285,147.00	662,851.60
Saskatchewan	21,308,387.89	44,921,699.89	3,599,402.96	1,707,359.13
Alberta	30,042,088.00	58,365,399.03	600,000.00	308,834.57
Yukon	325,992.00	651,119.65	6,584.22	3,296.48
Northwest Territories	565,957.50	1,175,750.32	29,476.95	14,188.98
			\$ 18,487,106.65	\$ 9,244,106.90

to the 69% increase in the year 1963 over 1962. The smaller increase is due to the fact that less extensive benefits were added by the Provincial Plans during the year. The federal contribution towards the cost of out-patient services in a province is in the same proportion as the federal contribution for in-patient services in that province.

Table J shows the total contribution payable by Canada to participating provinces with respect to 1964, totalling more than 420 million dollars. It will be recalled, however, that advances had been made to the provinces in an amount exceeding 408 million dollars so that the final payment for 1964 total about twelve million dollars.

Table K sets out the details of the cost of in-patient services in 1964 in each of the provinces. It will be noted that the provincial costs shown on the last line of this table are the final in-patient costs reported in Table F. This table shows the amount included or deducted in computing the in-patient costs.

The amounts shown for room differentials in the offset income section amount to 50% of the net earnings of the hospitals from charges for private and semi-private accommodation over and above standard ward rates. In some provinces the remaining 50% of this income is left with the hospitals, while in others, varying methods are applied. In Newfoundland, Nova Scotia, Ontario and Saskatchewan the full 50% is left with the hospitals; in Quebec and British Columbia 40% is left; in New Brunswick 25%; in Manitoba 20%; while in Prince Edward Island and Alberta the hospitals do not retain any of this income.

The provincial payments to federally-owned hospitals are shown in paragraph 2 of Table K. These are payments for insured in-patient services rendered to insured persons in hospitals operated by the Departments of Veterans Affairs, National Defence and National Health and Welfare.

When insured services are furnished to a person in respect of an injury or disability, where such person is legally entitled to recover the cost of such services from some other person by way of damages, the hospital account is paid by the provincial authority, and action is then taken to recover the cost from the responsible third party. The amounts so recovered in respect of insured in-patient services are shown on the second last line of Table K.

9. Comparative Data

It has been explained previously that essential parts of the formula for the payment of contributions to the provinces, are the per capita cost of in-patient services in the provinces, and the per capita cost of in-patient

TABLE J

TOTAL CONTRIBUTIONS AND FINAL PAYMENTS MADE BY CANADA
BY PROVINCE WITH RESPECT TO 1964

PROVINCE	Contribution by Canada			Less: Regular Advances	Final Payments*
	In-Patient	Out-Patient	Total		
Newfoundland	\$ 9,112,236.00	\$ 448,799.91	\$ 9,561,035.91	\$ 9,163,254.76	\$ 397,781.15
Prince Edward Island	1,932,305.80	166,355.71	2,098,661.51	2,038,278.01	60,383.50
Nova Scotia	14,886,416.00	1,079,583.37	15,965,999.37	15,461,094.13	504,905.24
New Brunswick	13,108,907.70	301,330.87	13,410,238.57	12,962,173.28	448,065.29
Quebec	119,513,527.00	1,672,264.71	121,185,791.71	117,156,176.42	4,029,615.29
Ontario	145,225,068.08	2,879,241.57	148,104,309.65	144,514,104.74	3,590,204.91
Manitoba	19,878,382.76	662,851.60	20,541,234.36	20,022,406.77	518,827.59
Saskatchewan	21,308,387.89	1,707,359.13	23,015,747.02	22,178,651.60	837,095.42
Alberta	30,042,088.00	308,834.57	30,350,922.57	29,634,969.14	715,953.43
British Columbia	35,008,061.20	—	35,008,061.20	34,023,998.12	984,063.08
Yukon	325,992.00	3,296.48	329,288.48	329,293.34	— 4.86
Northwest Territories	565,957.50	14,188.98	580,146.48	562,629.45	17,517.03
CANADA	\$410,907,329.93	\$9,244,106.90	\$420,151,436.83	\$408,047,029.76	\$12,104,407.07

*Including special advances

COST OF IN-PATIENT SERVICES, BY PROVINCE, 1964

25

	Newfoundland	Prince Edward Island	Nova Scotia	New Brunswick	Quebec	Ontario
1. Hospitals listed in Part I of Schedule "A":						
Operating Expenses	\$16,761,822.92	\$3,977,837.05	\$34,270,151.33	\$31,228,700.64	\$286,593,756.57	\$363,536,230.00
Less:						
Ancillary Operations	35,079.85	—	—	—	—	124,596.00
Interest of loans	57,897.11	98,089.80	845,580.81	1,361,382.91	8,592,387.09	2,971,883.00
Depreciation	944,726.23	171,502.34	1,082,216.32	1,832,404.22	5,374,074.41	10,991,156.00
Direct Cost: Research Projects	—	—	9,935.30	—	2,005,142.12	2,349,147.00
Ambulance Service	11,068.82	—	32,321.47	54,622.13	225,668.97	34,171.00
O.P.D.	125,808.56	—	143,224.65	—	2,296,590.73	2,064,154.00
Unapproved Expenses	121,170.55	71,973.89	578,933.48	199,120.71	3,060,445.43	2,284,364.00
Offset Income:						
Federal Government	112,132.85	63,759.00	100,578.75	56,660.60	118,618.60	384,768.00
Workmen's Compensation	225,076.65	37,322.00	403,385.85	423,327.35	2,983,449.55	6,150,153.00
Non-Residents	60,087.32	59,034.50	570,837.15	882,816.95	2,887,363.46	5,000,921.00
Care Deemed Unnecessary	6,564.70	8,883.50	19,014.25	940.15	58,907.60	104,128.00
Room Differential	161,276.20	82,808.00	741,631.72	747,427.95	9,871,715.01	9,612,678.00
Non-Benefit Drugs	—	—	—	119.03	24,562.19	6,012.00
Out-Patient Services	1,108,587.96	296,403.73	2,469,826.14	1,385,882.58	13,025,694.39	19,480,605.00
Health Grants	67,319.55	4,587.50	—	—	1,334,860.36	406,598.00
Recoveries and Sales	917,378.57	182,163.66	1,481,688.13	1,491,451.66	10,802,604.28	12,026,432.00
Other Income	115,751.98	18,903.49	40,069.53	-40,570.58	1,155,437.71	555,489.00
Other Deductions	22,811.39	—	—	17,808.36	1,794,145.52	1,008,206.00
Total Deductions	4,092,738.29	1,095,431.41	8,519,243.55	8,413,394.02	65,611,667.42	75,555,461.00
Net Operating Costs	12,669,084.63	2,882,405.64	25,750,907.78	22,815,306.62	220,982,089.15	287,980,769.00
2. Provincial Payments:						
Equipment	1,654,970.42	—	183,010.20	1,489,986.54	—	—
Contract Hospitals	339,658.67	23,581.50	150,908.48	87,310.42	9,255,195.19	8,701,397.00
Federal Hospitals	37,483.00	—	995,970.00	731,397.65	3,503,421.27	6,939,373.00
Out-of-Province Care	465,793.93	221,830.86	430,854.10	869,376.92	4,222,873.33	3,642,512.00
3. Authorized Charges:						
Contract Hospitals	—	—	—	—	—	—
Federal Hospitals	—	—	—	—	—	—
4. Sub-Total	15,166,990.65	3,127,818.00	27,511,650.56	25,993,378.15	237,963,578.94	307,264,051.00
5. Amounts Recovered	44,523.40	12,069.60	129,712.60	63,502.52	1,289,509.75	1,605,206.00
6. Cost of In-Patient Services	\$15,122,467.25	\$3,115,748.40	\$27,381,937.96	\$25,929,875.63	\$236,674,069.19	\$305,658,845.00

TABLE K (Cont'd)

	Manitoba	Saskatchewan	Alberta	British Columbia	Yukon	Northwest Territories
1. Hospitals listed in Part I of Schedule "A":						
Operating Expenses	\$45,550,639.00	\$55,001,733.95	\$74,931,375.83	\$78,301,701.46	\$155,789.16	\$ 270,112.92
Less:						
Ancillary Operations	-	37,496.33	75,225.62	2,437.86	-	-
Interest on loans	956,450.00	499,832.58	3,373,807.51	74,727.38	-	1,247.39
Depreciation	1,005,554.00	1,785,615.65	4,005,437.35	4,094,507.01	-	20,103.73
Direct Cost: Research Projects	9,161.00	5,187.18	187,074.16	56.51	-	-
Ambulance Service	671.00	6,398.18	-	7,749.10	-	-
O.P.D.	822,477.00	-	942,202.59	325,341.27	-	-
Unapproved Expenses	203,471.00	596,992.70	1,703,121.96	583,503.04	-	20.62
Offset Income:						
Federal Government	83,835.00	394,951.53	361,201.72	127,547.52	325.00	4,878.00
Workmen's Compensation	473,915.00	422,908.43	1,044,737.50	1,782,703.05	9,225.00	7,225.00
Non-Residents	1,494,248.00	687,431.53	930,496.34	956,369.74	2,192.00	3,832.00
Care Deemed Unnecessary	59,814.00	5,617.40	87.00	383,586.65	700.00	200.00
Room Differential	720,393.00	387,509.98	978,903.37	1,069,730.53	-	-
Non-Benefit Drugs	-	585,073.23	33,602.51	33,237.73	-	-
Out-Patient Services	1,627,237.00	3,452,657.14	2,557,368.83	3,316,250.82	12,111.19	17,439.79
Health Grants	72,388.00	45,000.81	-	116,252.96	-	-
Recoveries and Sales	2,016,631.00	1,463,709.21	2,598,230.42	2,644,686.24	5,935.70	6,680.48
Other Income	135,137.00	305,922.98	210,250.45	92,674.22	221.66	-
Other Deductions	98,144.00	1,121,740.42	-	66,034.22	-	360.00
Total Deductions	9,779,526.00	11,804,045.28	19,001,747.33	15,677,395.85	30,710.55	61,987.01
Net Operating Costs	35,771,113.00	43,197,688.67	55,929,628.50	62,624,305.61	125,078.61	208,125.91
2. Provincial Payments:						
Equipment	30,825.00	79,441.82	4,073,107.91	1,240,729.21	8,021.58	10,974.27
Contract Hospitals	612,427.00	188,238.35	1,289,421.71	427,698.75	467.42	300,689.04
Federal Hospitals	1,733,319.00	469,975.85	1,701,197.89	3,097,216.75	424,050.00	350,181.00
Out-of-Province Care	579,827.00	1,060,706.35	891,758.84	687,747.64	101,065.42	322,490.60
3. Authorized Charges:						
Contract Hospitals	-	-	297,667.20	10,760.00	-	27,015.00
Federal Hospitals	-	-	261,195.30	168,431.00	-	26,070.00
4. Sub-Total	38,727,511.00	44,996,051.04	64,443,977.35	68,256,888.96	658,683.03	1,245,545.82
5. Amounts Recovered	186,993.00	74,351.15	240,199.42	408,928.49	7,563.38	4,470.50
6. Cost of In-Patient Services	\$38,540,518.00	\$44,921,699.89	\$64,203,777.93	\$67,847,960.47	\$651,119.65	\$1,241,075.32

services in Canada. For the final calculation of the federal contribution, these per capita costs are based on actual shareable costs as defined in the Hospital Insurance Regulations. It is possible to make comparisons with the amounts of the final contributions as set out in earlier reports to Parliament. As explained earlier in this report, in connection with the final contribution for the calendar year 1959, only seven provinces participated in the joint programme for the whole of the calendar year, Nova Scotia and Ontario having commenced on January 1, 1959. Insofar as the calendar year 1958 was concerned, only the original five provinces were participating, (Newfoundland, Manitoba, Saskatchewan, Alberta and British Columbia) and these joint programmes only commenced on July 1st of that year.

These facts should be kept in mind when reviewing the data presented in the two Tables L and M.

Table L shows the per capita cost of in-patient services and the percentage increase of these per capita costs over the previous year, by province, for the calendar years from 1958 to 1964 inclusive. The per capita costs shown for 1964, are based without exception on the shareable in-patient costs in all provinces, and show a national per capita cost of \$43.52. This represents an increase of 10.3% over the national per capita cost for 1963 which was \$39.44. This cost, in turn represented an increase of 10.8% over the per capita cost for 1962 which was \$35.61.

It should be noted that although the national per capita cost increased from year to year, the percentage of the increase from one year to another, was on a diminishing basis.

Table M shows the final cost of in-patient services for the calendar years from 1958 to 1964 inclusive, by province, and it also shows the percentage increase over the previous year for each cost figure. The amounts shown for the calendar year 1964 were, in all instances, the actual shareable costs as defined in the Hospital Insurance Regulations and the total amount of more than \$831 million represented an increase of 12.4% over the amount shown as the final cost for 1963. The final cost for 1963, which amounted to some \$739 million, was 12.7% more than the final cost in 1962.

It will be noted that the percentage increases from year to year of the final costs of in-patient services, also appear to show a downward trend from year to year. However, it must be kept in mind that the actual amounts paid for in-patient services reflect, among other things, an increasing population. This increase in population is not shown separately in the per capita figures shown in Table L.

TABLE L

PER CAPITA COST OF IN-PATIENT SERVICES, AND PERCENTAGE INCREASE
OVER PREVIOUS YEAR, BY PROVINCE, 1958 to 1964

PROVINCE	1959		1960		1961		1962		1963		1964	
	Cost	Increase	Cost	Increase	Cost	Increase	Cost	Increase	Cost	Increase	Cost	Increase
Newfoundland	\$13.7603	18.5	\$18.4199	13.0	\$19.5339	6.0	\$21.4465	9.8	\$24.2039	12.9	\$30.8622	27.5
Prince Edward Island	15.2249	2.9	19.2321	22.7	23.0063	19.6	24.8749	8.1	26.6156	7.0	29.3939	10.4
Nova Scotia	17.2940	19.7	25.1681	21.6	28.3157	12.5	30.6205	8.1	33.4375	9.2	37.0527	10.8
New Brunswick	16.4678	29.0	27.4360	29.2	32.7226	19.3	36.1266	10.4	38.4608	6.5	42.5778	10.7
Quebec	17.6582	6.1	21.3643	14.0	26.9919	26.3	32.0059	18.6	37.4275	16.9	42.6747	14.0
Ontario	22.0245	24.6	31.8345	16.0	35.0343	10.1	38.9579	11.2	42.6898	9.6	46.7368	9.5
Manitoba	22.8411	21.9	31.1363	11.8	33.4899	7.6	35.8371	7.0	38.7208	8.0	40.6975	5.1
Saskatchewan	32.0523	8.3	37.3806	7.7	38.8121	3.8	40.8859	5.3	40.0291	7.7	47.8399	19.5
Alberta	25.6619	12.4	32.9063	14.1	35.0002	6.4	37.7881	8.0	41.0656	8.7	45.2139	10.1
British Columbia	25.2616	12.2	31.7386	11.9	34.2686	8.0	35.9866	5.0	37.9856	5.6	39.3550	3.6
Yukon												
Northwest Territories	13.0843	-33.5	47.9502	295.2	49.2003	2.6	55.6358	13.1	43.0296	-22.7	43.4080	0.9
			26.4408	308.0	40.5183	53.2	46.1728	14.0	55.9859	21.3	49.6430	-11.3
CANADA	\$21.2329	16.1	\$28.3140	14.9	\$31.9673	12.9	\$35.6077	11.4	\$39.4430	10.8	\$43.5230	10.3

TABLE M

FINAL COST OF IN-PATIENT SERVICES AND PERCENTAGE INCREASE OVER PREVIOUS YEAR, BY PROVINCE
1958 to 1964

PROV- INCE	1958		1959		1960		1961		1962		1963		1964	
	Final Cost	Percentage Increase	Final Cost	Percentage Increase	Final Cost	Percentage Increase	Final Cost	Percentage Increase	Final Cost	Percentage Increase	Final Cost	Percentage Increase	Final Cost	Percentage Increase
Nfld.	\$ 5,990,505.48		\$ 7,304,160.36	21.7	\$ 8,417,909.69	15.2	\$ 8,912,638.46	5.9	\$ 10,036,939.85	12.6	\$ 11,593,679.79	15.5	\$ 15,122,467.25	30.4
P.E.I.	* 1,507,266.00	5.0	1,582,861.00	5.0	1,961,669.26	23.9	2,381,866.48	21.4	2,611,862.11	9.7	2,794,633.27	7.0	3,115,748.40	11.5
N.S.	* 11,950,175.00	20.5	14,402,853.40	20.5	17,668,032.81	22.7	20,289,660.23	14.8	22,169,262.33	9.3	24,543,125.50	10.7	27,381,937.96	11.6
N.B.	* 9,403,103.00	31.7	12,383,380.45	31.7	16,269,527.62	31.4	19,306,832.90	18.7	21,675,939.40	12.3	23,307,248.04	7.5	25,929,875.63	11.3
Que.	* 8,509,34,094.00	8.6	* 93,324,876.00	8.6	* 108,680,320.00	16.5	141,446,468.31	30.1	171,103,659.31	21.0	203,080,113.08	19.2	236,674,093.19	16.0
Ont.	* 126,839,227.00	27.9	162,184,055.06	27.9	192,471,252.07	18.7	216,933,851.00	12.7	245,201,158.25	13.0	273,300,237.00	11.5	305,658,845.00	11.8
Man.	19,620,464.00	24.1	24,342,268.00	24.1	27,649,032.00	13.6	30,525,227.07	10.4	33,113,476.00	8.5	36,358,662.00	9.8	38,540,518.00	6.0
Sask.	28,300,242.33	10.0	31,214,755.68	10.0	33,994,161.33	8.6	35,763,267.00	5.5	37,901,226.61	6.0	40,947,025.53	8.0	44,921,699.89	9.7
Alta.	30,537,627.70	19.4	35,541,554.53	19.4	41,856,756.05	17.8	46,229,813.13	10.4	51,316,218.56	11.0	57,204,320.90	11.5	64,203,777.93	12.2
B.C.	38,650,193.85	14.1	44,114,704.55	14.1	48,891,381.71	14.7	55,367,981.20	9.4	59,198,034.52	6.9	63,853,835.38	7.9	67,847,960.47	6.3
Yukon	* 418,696.00	-11.4	* 287,346.00	-11.4	623,332.55	319.2	696,724.90	11.8	778,901.05	11.8	645,443.58	-17.1	651,119.65	0.9
N.W.T.					355,345.80		902,103.37	62.5	1,108,146.99	22.8	1,343,661.22	21.3	1,241,075.32	-7.6
CANADA	359,217,496.86	18.8	426,682,818.03	18.8	500,148,350.89	17.1	578,756,434.05	15.6	656,214,824.89	13.4	739,872,385.39	12.7	831,289,094.69	12.4

* Estimated for non-participating provinces.

PART II

This part of the report is an analysis of the statistics on hospitals and the care they provide. It deals with types of hospital, services to hospital patients, bed facilities, hospital expenditures, and personnel. It also contains information on sex, age, and diagnosis of the patients.

Hospitals whose budgets are subject to approval by the government of the province (budget review hospitals), private hospitals under contract with the provincial government to provide care for patients that are insured under a provincial plan (contract hospitals), and the hospitals that are operated by the Government of Canada submit their statistical data to the provincial governments. The provinces edit and process the returns and send either returns or tabulations based upon them to the Government of Canada.

At the end of 1965, 1,293 hospitals and 47 other facilities were listed in the hospital-insurance agreements. There were also seven hospitals that closed during 1965 and were no longer listed at the end of the year, but their patient-days have been included in the report. Of the 1,293 hospitals that were listed at the end of 1965, three were in the U.S.A.; their data are excluded from the tables. The 47 other facilities were clinics, laboratories, a medical centre and Red-Cross blood depots. Thirteen hospitals in Canada with 375 beds (estimated) altogether did not report.⁽¹⁾

Tables 1 and A8 deal with listed hospitals.

1. Utilization of Hospital Care

a) Days of Care

In 1965, the number of insured patient-days (excluding newborn) was almost 36 million, 1.8 per cent higher than in 1964, while the estimated insured population was 2.0 per cent above the insured population of 1964. Over the period 1961-1965, insured patient-days had increased by 15 per cent or by 3.5 per cent per year on the average. In Newfoundland the increase from 1964 to 1965 was 7.3 per cent, in British Columbia 3.2 per cent, in Ontario 2.5 per cent, and in Quebec 2.3 per cent; Alberta showed a 1.1 per cent decrease (Table 2).

(1) Three of these were in Quebec: one chronic hospital with 200 beds, one convalescent hospital with 115 beds, and one federal hospital with 4 beds. The other ten were in other provinces and had only 56 beds in all. Two other hospitals, which did submit reports, did not submit data on personnel.

TABLE 1

NUMBER OF HOSPITALS AND OTHER FACILITIES LISTED IN HOSPITAL INSURANCE
AGREEMENTS AND REPORTING, CANADA, 1961-1965

Year	Number of Hospitals Listed	Number of Other Facilities	Number of Hospitals Reporting
1961	1,340	26	1,311
1962	1,305	33	1,282
1963	1,291	35	1,291
1964	1,313	34	1,295
1965	1,290	47	1,277 ¹

¹ This figure excludes 13 hospitals, with an estimated 375 beds, that did not submit annual returns (Reasons for non-report include not being in operation, not providing patient services and not having sufficient staff to complete the forms.); all 13 remain on the lists in the agreements.

Source: Table A8 and annual reports.

TABLE 2

INSURED PATIENT-DAYS EXCLUDING NEWBORN IN HOSPITALS LISTED IN HOSPITAL INSURANCE AGREEMENTS AND INSURED POPULATION, CANADA AND PROVINCES, 1961-1965.

PROVINCE	Insured Patient-Days ⁽¹⁾					Insured Population ⁽²⁾				
	1961	1962	1963	1964	1965	1961	1962	1963	1964	1965
Newfoundland	536,918	558,682	588,959	647,959	695,012	456,265	468,000	479,000	490,000	497,000
Prince Edward Island	149,805	164,802	165,890	166,190	167,557	86,979	91,664	105,000	106,000	106,000
Nova Scotia	1,051,424	1,080,556	1,118,554	1,173,051	1,176,141	716,552	724,000	734,000	739,000	742,000
New Brunswick	976,537	1,003,107	1,031,860	1,066,984	1,079,196	590,015	600,000	606,000	609,000	615,000
Quebec	8,077,091	8,686,653	9,247,563	9,702,623	9,926,175	5,240,328	5,346,000	5,450,000	5,546,000	5,640,000 ⁽³⁾
Ontario	11,141,030	11,664,504	12,099,892	12,542,986	12,861,580	5,897,909	6,090,437	6,268,198	6,435,855	6,626,010 ⁽³⁾
Manitoba	1,613,598	1,705,350	1,750,677	1,794,648	1,767,170	907,665	919,343	914,231	944,108	946,000 ⁽³⁾
Saskatchewan	1,997,712	1,965,028	2,091,295	2,135,453	2,136,074	890,678	894,956	914,774	932,909	938,916
Alberta	2,944,358	3,084,441	3,116,612	3,140,045	3,105,432	1,320,844	1,358,000	1,393,000	1,420,000	1,440,000
British Columbia	2,707,098	2,752,392	2,808,885	2,850,357	2,941,211	1,615,707	1,645,000	1,681,000	1,724,000	1,775,000
Yukon	24,871	27,836	20,126	18,334	20,649	14,161	14,000	15,000	15,000	15,000
Northwest Territories	27,402	31,811	42,596	41,676	38,340	22,264	24,000	24,000	25,000	25,000
CANADA	31,247,844	32,725,162	34,082,909	35,280,306	35,914,537	17,759,367	18,175,400	18,584,203	18,986,872	19,365,926 ⁽³⁾

(1) Excludes out-of-province insured hospital care.

(2) Average number of insured persons under provincial plans approved for purposes of payment of shareable costs

(3) Preliminary estimates

Source: Table A1 and annual reports.

Insured patient-days per 1,000 population are shown for each province in Table 3. This rate in 1965 varied between provinces from 1,398 in Newfoundland to 2,275 in Saskatchewan. Differences in the age distribution of the population and in the volume of long-term chronic care were among the factors accounting for this variability.

The amount of hospital care, measured in terms of patient-days of care per 1,000 population, also depends to a large extent on the number of available beds. Thus, comparison of Table 10, (number of beds per 1,000 population) and Table 3 (patient-days per 1,000 population) shows, that in Newfoundland, for example, a substantial rise in the number of beds between 1961 and 1965 coincided with an increase in patient-days and also, that in Saskatchewan and Alberta both the bed population ratios and the utilization rates (patient-days) are the highest in all provinces.

Table 4 shows the distribution of all patient-days (excluding newborn) according to the agency that is responsible for paying for them. The data are compiled from annual reports of individual hospitals. Provincial-plan days, about 90 per cent, do not include days, where the patient was insured by the plan of another province or by another agency. Only 0.5 per cent of the patient-days were not insured.

Total patient-days have increased since 1961 by 11.2 per cent or, on the average, by 2.7 per cent per year. Of all patient-days budget review hospitals accounted for 88 per cent in 1965, contract hospitals for 5 per cent, and hospitals of the Government of Canada for 7 per cent (Table A2). The proportions have been almost unchanged since 1961.

Distribution by type of accommodation is given in Table 5. The proportion of standard-ward accommodation in budget review hospitals had been constant at 68 per cent since 1961. In contract hospitals standard-ward accommodation had declined from 68 per cent in 1961 to 52 per cent in 1965. Hospitals of the Government of Canada do not differentiate between standard accommodation and private or semi-private accommodation.

b) Admissions and Separations

The rate (per 1,000 population) of admissions to listed hospitals for Canada changed from 158 in 1961 to 162 in 1964 and to 161 in 1965. Quebec and Ontario show the same trend, a rise from 1961 to 1964 and a decline in 1965. In British Columbia the admission rate was highest in 1963. In Newfoundland and Prince Edward Island it increased

TABLE 3

INSURED PATIENT-DAYS EXCLUDING NEWBORN IN HOSPITALS LISTED IN HOSPITAL INSURANCE AGREEMENTS, RATE PER 1,000 INSURED POPULATION AND INDEX NUMBERS, CANADA AND PROVINCES, 1961-1965.

PROVINCE	Insured Patient-Days per 1,000 Insured Population						Index Numbers of Insured Patient-Days per 1,000 Insured Population					
	1961	1962	1963	1964	1965		1961	1962	1963	1964	1965	
Newfoundland	1,176.8	1,193.8	1,229.6	1,322.4	1,398.4		100.0	101.4	104.5	112.4	118.8	
Prince Edward Island	1,722.3	1,797.9	1,579.9	1,567.8	1,580.7		100.0	104.4	91.7	91.0	91.8	
Nova Scotia	1,467.3	1,492.5	1,523.9	1,587.3	1,585.1		100.0	101.7	103.9	108.2	108.0	
New Brunswick	1,655.1	1,671.8	1,702.7	1,752.0	1,754.8		100.0	101.0	102.9	105.9	106.0	
Quebec	1,541.3	1,624.9	1,696.8	1,749.5	1,760.0		100.0	105.4	110.1	113.5	114.2	
Ontario	1,889.0	1,915.2	1,930.4	1,948.9	1,941.1		100.0	101.4	102.2	103.2	102.8	
Manitoba	1,777.7	1,855.0	1,914.9	1,900.9	1,868.0		100.0	104.3	107.7	106.9	105.1	
Saskatchewan	2,242.9	2,195.7	2,286.1	2,289.0	2,275.0		100.0	97.9	101.9	102.1	101.4	
Alberta	2,229.1	2,271.3	2,237.3	2,211.3	2,156.6		100.0	101.9	100.4	99.2	96.7	
British Columbia	1,675.5	1,673.2	1,671.0	1,653.3	1,657.0		100.0	99.9	99.7	98.7	98.9	
Yukon	1,756.3	1,988.3	1,341.7	1,222.3	1,376.6		100.0	113.2	76.4	69.6	78.4	
Northwest Territories	1,230.8	1,325.5	1,774.8	1,667.0	1,533.6		100.0	107.7	144.2	135.4	124.6	
CANADA	1,759.5	1,800.5	1,834.0	1,858.1	1,854.5		100.0	102.3	104.2	105.6	105.4	

Source: Table 1.

TABLE 4

PATIENT-DAYS EXCLUDING NEWBORN IN HOSPITALS LISTED IN HOSPITAL INSURANCE AGREEMENTS, NUMBER AND RATES PER 1,000 POPULATION, AND NUMBER AND PERCENTAGE OF PATIENT-DAYS BY RESPONSIBILITY FOR PAYMENT, CANADA, 1961-1965

Responsibility for Payment	Number					Per Cent				
	1961	1962	1963	1964	1965	1961	1962	1963	1964	1965
Provincial plan	31,247,844	32,725,162	34,082,909	35,280,306	35,914,537	87.8	89.2	90.1	90.8	90.7
Insured residents, care not responsibility of provincial plan	145,998	288,042	228,188	195,475	294,587	0.4	0.8	0.6	0.5	0.7
Uninsured residents of province	301,748	237,529	222,493	193,149	201,197	0.8	0.6	0.6	0.5	0.5
Non-residents of province	472,450	530,364	555,794	592,867	623,864	1.3	1.4	1.5	1.5	1.6
Workmen's Compensation Board	584,703	577,328	577,253	621,205	635,920	1.6	1.6	1.5	1.6	1.6
Government of Canada	2,226,079	1,951,432	1,885,415	1,865,214	1,929,401	6.3	5.3	5.0	4.8	4.9
Undistributed patient-days	620,495	392,754	275,363	125,226	-	1.7	1.1	0.7	0.3	-
Total	35,599,317	36,702,611	37,827,415	38,873,442	39,599,506	100.0	100.0	100.0	100.0	100.0
Rate per 1,000 population (1)	1,951.9	1,976.4	2,001.9	2,021.0	2,023.4	xx	xx	xx	xx	xx

(1) Based on the "Census of Canada", 1961 and population estimates of the Dominion Bureau of Statistics as on June 1st
Source: Table A1 and annual reports.

TABLE 5

PATIENT-DAYS EXCLUDING NEWBORN IN HOSPITALS LISTED IN HOSPITAL INSURANCE AGREEMENTS, BY STATUS OF HOSPITAL AND TYPE OF ACCOMMODATION⁽¹⁾ AND PERCENTAGE DISTRIBUTION BY TYPE OF ACCOMMODATION, CANADA, 1961-1965

Year	Budget Review		Contract		Government of Canada		Total	
	Number	Percent	Number	Percent	Number	Percent	Number	Percent
	Standard Ward							
1961	20,686,869	68.1	1,379,903	67.5	2,951,479	100.0	25,018,251	70.7
1962	21,458,461	68.1	1,237,814	62.1	3,128,410	100.0	25,824,685	70.2
1963	22,100,186	67.7	1,241,812	58.1	3,048,255	100.0	26,390,253	69.7
1964	22,935,218	67.8	1,080,303	53.1	2,996,115	100.0	27,011,636	69.3
1965	23,613,568	67.8	981,540	52.3	2,915,346	100.0	27,510,454	69.5
	Private and Semiprivate rooms							
1961	9,687,562	31.9	662,974	32.5	*	*	10,350,536	29.3
1962	10,047,633	31.9	755,312	37.9	*	*	10,802,945	29.8
1963	10,540,197	32.3	896,965	41.9	*	*	11,437,162	30.3
1964	10,907,082	32.2	954,724	46.9	*	*	11,861,806	30.7
1965	11,195,005	32.2	894,047	47.7	*	*	12,089,052	30.5
	Total							
1961	30,374,431	100.0	2,042,877	100.0	2,951,479	100.0	35,368,787	100.0
1962	31,506,094	100.0	1,993,126	100.0	3,128,410	100.0	36,627,630	100.0
1963	32,640,383	100.0	2,138,777	100.0	3,048,255	100.0	37,827,415	100.0
1964	33,842,300	100.0	2,035,027	100.0	2,996,115	100.0	38,873,442	100.0
1965	34,808,573	100.0	1,875,587	100.0	2,915,346	100.0	39,599,506	100.0

* Not applicable

(1) Excludes patient-days in 1961 and 1962, for which the type of accommodation was not stated.

Sources: Table A3 and annual Reports.

every year since 1961, whereas the other provinces and the territories show a more or less irregular pattern, (Table 6).

Separations during a year include deaths of patients in hospitals. Hence the number of separations during a year and the rate per 1,000 population are almost equal to the corresponding statistics on admissions (Table A4).

c) Length of Hospital Stay

Average length of hospital stay is shown as the arithmetic mean of the number of days since admission, for all patients who left hospital during the year of observation. Also shown is the quotient of the number of patient days during a calendar year and the number of separations from hospital (live discharges and deaths) during the same year. The latter statistic differs from the former, since on the one hand it excludes time that patients spent before the year under observation and on the other hand it includes time, during the year of observation, of patients who were discharged after that year, and who are therefore excluded from the divisor. The differences are especially large for chronic hospitals (Table A5).

Average length of stay (based on patient-days since admission) in budget review general hospitals since 1961 changed from 10.0 to 10.2 days. This mean is greatly influenced by extreme values. Thus, in chronic hospitals, it fluctuated between 198 and 232 days and, since the proportion of long-term care for chronic conditions in listed hospitals varies within regions and over time, averages of length of stay for their patients are by themselves of little significance. Table 7 shows the average length of hospital stay by type of hospital, Table 8 by province, and Table A7, for budget review general hospitals only, by size of hospital. The last shows that average length of stay increases with size of hospital, because patients with conditions that require relatively long care and special treatment, which are usually not available in the smaller institutions, will lengthen the average stay in the larger hospitals.

Table 9 shows patient-days for all separations (patients who left hospital alive or who died) during 1965 by length of stay. From it one may calculate which proportion of all patient-days constituted days that were spent beyond a certain period of hospital stay. For example, 24 per cent of all patient-days that were spent by patients who left in 1965 were spent after the 29th day of a patient's sojourn.

TABLE 6

ADMISSIONS TO HOSPITALS LISTED IN HOSPITAL INSURANCE AGREEMENTS, NUMBER AND
RATES PER 1,000 POPULATION
CANADA AND PROVINCES, 1961-1965

PROVINCE	Number					Rate per 1,000 population				
	1961	1962	1963	1964	1965	1961	1962	1963	1964	1965
Newfoundland	50,915	54,451	56,352	58,835	64,716	111.2	115.9	117.2	119.8	130.0
Prince Edward Island	16,225	16,905	17,099	17,372	17,704	155.1	159.5	159.8	162.4	163.9
Nova Scotia	109,270	110,163	111,204	114,036	114,723	148.3	147.7	147.1	150.0	150.8
New Brunswick	104,333	104,635	105,950	108,213	108,629	174.5	172.4	172.6	175.4	174.4
Quebec	725,535	747,654	771,123	788,590	797,342	138.0	139.3	141.0	141.8	140.9
Ontario	949,771	970,460	1,009,102	1,040,030	1,050,890	152.3	153.0	156.5	157.9	156.1
Manitoba	165,555	170,534	175,689	176,113	171,497	179.6	182.4	184.9	183.8	178.3
Saskatchewan	199,448	195,942	211,275	211,495	211,814	215.6	210.7	226.4	224.3	222.7
Alberta	261,617	268,952	273,778	283,880	287,319	196.4	196.3	194.9	198.2	198.0
British Columbia	285,835	292,067	301,119	307,190	316,517	175.5	176.1	177.7	176.7	176.9
Yukon	3,491	3,643	3,296	2,931	2,813	238.7	242.9	219.7	183.2	187.5
Northwest Territories	4,554	6,003	6,775	6,533	6,561	198.0	250.1	282.3	261.3	262.4
CANADA	2,876,549	2,941,409	3,042,762	3,115,218	3,150,525	157.7	158.4	161.0	162.0	161.0

TABLE 7

AVERAGE LENGTH OF STAY EXCLUDING NEWBORN IN HOSPITALS LISTED IN HOSPITAL INSURANCE AGREEMENTS,
BY STATUS AND TYPE OF HOSPITAL, CANADA, 1961-1965

Year	Budget Review General	Budget Review Chronic	Budget Review Convalescent	Other Budget Review	All Budget Review	Contracts	Government of Canada	Total
Patient-days since admission divided by number of separations								
1961	10.0	231.8	42.1	18.5	11.0	15.2	35.4	11.7
1962	10.1	207.5	41.1	19.1	11.3	17.0	34.9	12.2
1963	10.1	219.5	40.9	22.4	11.4	18.0	39.5	12.4
1964	10.2	185.5	41.6	14.4	11.5	16.2	39.6	12.4
1965	10.2	197.9	43.4	17.1	11.5	18.7	41.1	12.4
Patient-days during year divided by number of separations								
1961	10.1	287.9	40.8	19.5	11.3	18.5	38.2	12.2
1962	10.1	220.6	40.9	20.3	11.3	18.3	34.6	12.3
1963	10.1	216.5	40.9	21.7	11.4	18.8	36.7	12.3
1964	10.2	188.0	41.6	14.6	11.5	19.8	37.1	12.4
1965	10.2	217.8	44.4	17.6	11.6	22.5	37.2	12.6

Source: Table A5 and annual reports.

TABLE 8

AVERAGE LENGTH OF STAY EXCLUDING NEWBORN IN BUDGET REVIEW GENERAL HOSPITALS,
CANADA AND PROVINCES, 1961-1965

PROVINCE	Patient-Days since Admission Divided by Number of Separations						Patient-Days during Year Divided by Number of Separations				
	1961	1962	1963	1964	1965		1961	1962	1963	1964	1965
Newfoundland	11.4	12.9	13.4	13.4	11.0		11.4	10.8	11.2	11.7	11.2
Prince Edward Island	9.9	9.8	9.9	9.5	9.8		9.8	10.0	9.8	9.7	9.5
Nova Scotia	9.8	10.1	10.3	10.6	10.6		9.9	10.1	10.4	10.6	10.5
New Brunswick	9.4	9.8	10.1	9.9	10.0		9.8	10.0	10.1	9.9	10.0
Quebec	10.4	10.3	10.3	10.3	10.3		10.5	10.5	10.3	10.4	10.4
Ontario	10.4	10.7	10.7	10.8	10.9		10.5	10.7	10.8	10.9	10.9
Manitoba	8.9	9.0	8.8	9.1	9.3		8.9	9.0	9.0	9.1	9.3
Saskatchewan	9.7	9.6	9.5	9.5	9.5		9.7	9.6	9.5	9.5	9.5
Alberta	9.0	9.2	9.0	8.9	8.9		9.0	9.1	8.9	8.9	8.9
British Columbia	9.7	9.5	9.5	9.4	9.3		9.6	9.5	9.5	9.4	9.3
Yukon	8.5	9.5	7.7	6.6	5.9		9.2	8.5	7.7	6.6	5.8
Northwest Territories	6.7	6.6	8.5	8.1	7.2		6.8	6.7	8.7	7.7	7.4
CANADA	10.0	10.1	10.1	10.2	10.2		10.1	10.1	10.1	10.2	10.2

Source: Table A 5 and annual reports.

TABLE 9

SEPARATIONS AND PATIENT-DAYS EXCLUDING NEWBORN SINCE ADMISSION BY
LENGTH OF STAY, NUMBER AND PERCENTAGE DISTRIBUTION¹ FOR
PATIENTS INSURED UNDER PROVINCIAL PLANS, CANADA, 1965

Length of Stay (in days)	Number		Per Cent	
	Separations	Patient-Days since Admission	Separations	Patient-Days since Admission
1	248,762	248,763	8.3	0.7
2	312,777	625,552	10.5	1.8
3	226,673	680,005	7.6	1.9
4 - 6	759,641	3,804,680	25.4	10.7
7 - 10	573,037	4,721,377	19.2	13.3
11 - 14	297,515	3,667,026	9.9	10.3
15 - 29	384,815	7,764,899	12.9	21.9
30 - 59	136,541	5,429,395	4.6	15.3
60 +	51,223	8,523,777	1.7	24.0
TOTAL	2,990,984	35,465,474	100.0	100.0

(1) Excludes Nova Scotia, the discrepancies between the number of separations with one, two, and three days since admission and the corresponding number of patient-days occur in the data as submitted by the provinces.

Source: Data supplied to the Department by Provincial Hospital Insurance authorities.

2. Beds and Occupancy

a) Beds

The number of beds in hospitals that were listed in hospital insurance agreements at the end of 1965 for Canada was 134,619; this is 2,000 or 1.5 per cent higher than the year before. The number of paediatric beds increased by 6 per cent, accounting for 967 of the bed increase. Increases in general beds (943), chronic and convalescent beds (245) and psychiatric beds (47) were 1 per cent each, while the number of obstetric beds was 1 per cent (206) less than in 1964.

This classification corresponds to the designation of beds by the hospital rather than to the diagnoses of the patients. Thus, especially in small hospitals, all beds may be classified as "general", so that the figures are only an approximation of the actual distribution of beds.

Tables 10, 11, and 12 contain statistics on hospital beds by province, size of hospital, and type of unit. Bed distribution by status of hospital and type of unit are illustrated in Figure 1.

b) Occupancy

Occupancy is the ratio during a year of the average number of patients to the average number of available beds, expressed as a percentage.

Over the five-year period 1961 to 1965, the occupancy ratio has remained almost constant. It fluctuated between 81.0 and 81.4 in budget review hospitals, 73.9 and 76.3 in federal hospitals, and between 76.2 and 82.1 per cent in contract hospitals (Table 13).

The occupancy of budget review general hospitals (Table 14) was almost constant, being 80.3 or 80.5 every year during the period. Among the provinces, occupancy in these hospitals in 1965 ranged from 74.4 in Alberta to 82.9 in Ontario. In the Yukon and the Northwest Territories the ratios are much lower. Occupancy in budget review chronic hospitals was 91.4 per cent for Canada, ranging from 87.3 in Manitoba to 96.5 in British Columbia (Table A14).

In budget review general hospitals occupancy increases with the size of hospital. In almost all the provinces the ratio was below average for hospitals with a capacity of less than 100 beds, and above average for hospitals of over 300 beds capacity (Table A15).

TABLE 10

BEDS IN HOSPITALS LISTED IN HOSPITAL INSURANCE AGREEMENTS, NUMBER AND RATIO PER 1,000 POPULATION,
CANADA AND PROVINCES, 1961-1965

PROVINCE	Number					Beds per 1,000 Population				
	1961	1962	1963	1964	1965	1961	1962	1963	1964	1965
Newfoundland	1,982	2,152	2,403	2,542	2,867	4.3	4.6	5.0	5.2	5.8
Prince Edward Island	651	674	629	628	629	6.2	6.4	5.9	5.9	5.8
Nova Scotia	4,138	4,241	4,469	4,537	4,749	5.6	5.7	5.9	6.0	6.2
New Brunswick	3,709	3,861	4,008	4,131	4,049	6.2	6.4	6.5	6.7	6.5
Quebec	32,338	32,816	33,823	34,469	35,862	6.1	6.1	6.2	6.2	6.3
Ontario	41,389	43,035	44,965	46,390	46,741	6.6	6.8	7.0	7.0	6.9
Manitoba	6,685	6,970	6,951	6,992	7,004	7.3	7.5	7.3	7.3	7.3
Saskatchewan	7,578	7,573	7,769	7,937	7,929	8.2	8.1	8.3	8.4	8.3
Alberta	11,382	11,733	12,034	12,804	12,073	8.5	8.6	8.6	8.9	8.3
British Columbia	10,710	11,236	11,464	11,555	12,081	6.6	6.8	6.8	6.6	6.8
Yukon	157	160	161	152	160	10.7	10.7	10.7	9.5	10.7
Northwest Territories	327	432	482	486	475	14.2	18.0	20.1	19.4	19.0
CANADA	121,046	124,883	129,158	132,623	134,619	6.6	6.7	6.8	6.9	6.9

Source: Table A9 and annual reports.

TABLE 11

BUDGET REVIEW GENERAL HOSPITALS BY SIZE OF HOSPITAL AND NUMBER OF BEDS,
NUMBERS AND PERCENTAGE DISTRIBUTIONS, CANADA, 1961-1965

Size of Hospital (Rated Bed Capacity)										
Year	1-9	10-24	25-49	50-99	100-199	200-299	300-499	500-999	1,000 and over	Total
Number of Hospitals										
1961	56	217	196	134	124	45	40	27	6	845
1962	70	198	189	139	128	48	44	27	7	850
1963	66	197	191	142	131	49	46	32	7	861
1964	55	206	188	140	134	56	48	32	7	866
1965	49	211	187	145	129	60	52	30	8	871
Per Cent of Hospitals										
1961	6.6	25.7	23.2	15.9	14.7	5.3	4.7	3.2	.7	100.0
1962	8.2	23.3	22.2	16.4	15.1	5.6	5.2	3.2	.8	100.0
1963	7.7	22.9	22.2	16.5	15.2	5.7	5.3	3.7	.8	100.0
1964	6.4	23.8	21.7	16.2	15.5	6.5	5.5	3.7	.8	100.0
1965	5.6	24.2	21.5	16.6	14.8	6.9	6.0	3.4	.9	100.0
Number of Beds Set up										
1961	602	4,155	7,997	9,957	17,800	10,609	15,248	17,690	7,061	91,119
1962	784	3,854	7,166	10,232	18,259	11,308	16,674	17,493	8,178	93,948
1963	719	3,861	7,157	10,370	18,392	11,367	16,915	20,213	8,262	97,256
1964	522	3,953	7,035	10,225	18,807	13,242	17,555	20,531	8,374	100,244
1965	486	3,996	7,026	10,500	17,818	14,218	19,222	19,198	9,480	101,944
Per Cent of Beds Set up										
1961	.7	4.6	8.8	10.9	19.5	11.6	16.7	19.4	7.7	100.0
1962	.8	4.1	7.6	10.9	19.4	12.0	17.7	18.6	8.7	100.0
1963	.7	4.0	7.4	10.7	18.9	11.7	17.4	20.8	8.5	100.0
1964	.5	3.9	7.0	10.2	18.8	13.2	17.5	20.5	8.4	100.0
1965	.5	3.9	6.9	10.3	17.5	13.9	18.9	18.8	9.3	100.0

TABLE 12

BEDS IN HOSPITALS LISTED IN HOSPITAL INSURANCE AGREEMENTS BY STATUS OF HOSPITAL AND NUMBER AND PERCENTAGE DISTRIBUTION BY TYPE OF UNIT, CANADA, 1965

Type of Unit	Number				Per Cent			
	All Budget Review	Contract	Government of Canada	All Hospitals	All Budget Review	Contract	Government of Canada	All Hospitals
Acute Treatment								
General	69,516	1,815	5,125	76,456	59.0	29.0	48.8	56.8
Obstetric	13,070	347	142	13,559	11.0	5.6	1.3	10.1
Paediatric	16,471	285	388	17,144	14.0	4.6	3.7	12.7
Psychiatric	1,868	1	1,379	3,248	1.6	*	13.1	2.4
Sub-total	100,925	2,448	7,034	110,407	85.6	39.2	67.0	82.0
Chronic and convalescent	16,956	3,794	3,462	24,212	14.4	60.8	33.0	18.0
Total	117,881	6,242	10,496	134,619	100.0	100.0	100.0	100.0
Number of Hospitals Reporting	991	210	76	1,277	-	-	-	-

* Less than 0.05

Source: Tables A12 and A13

FIGURE 1

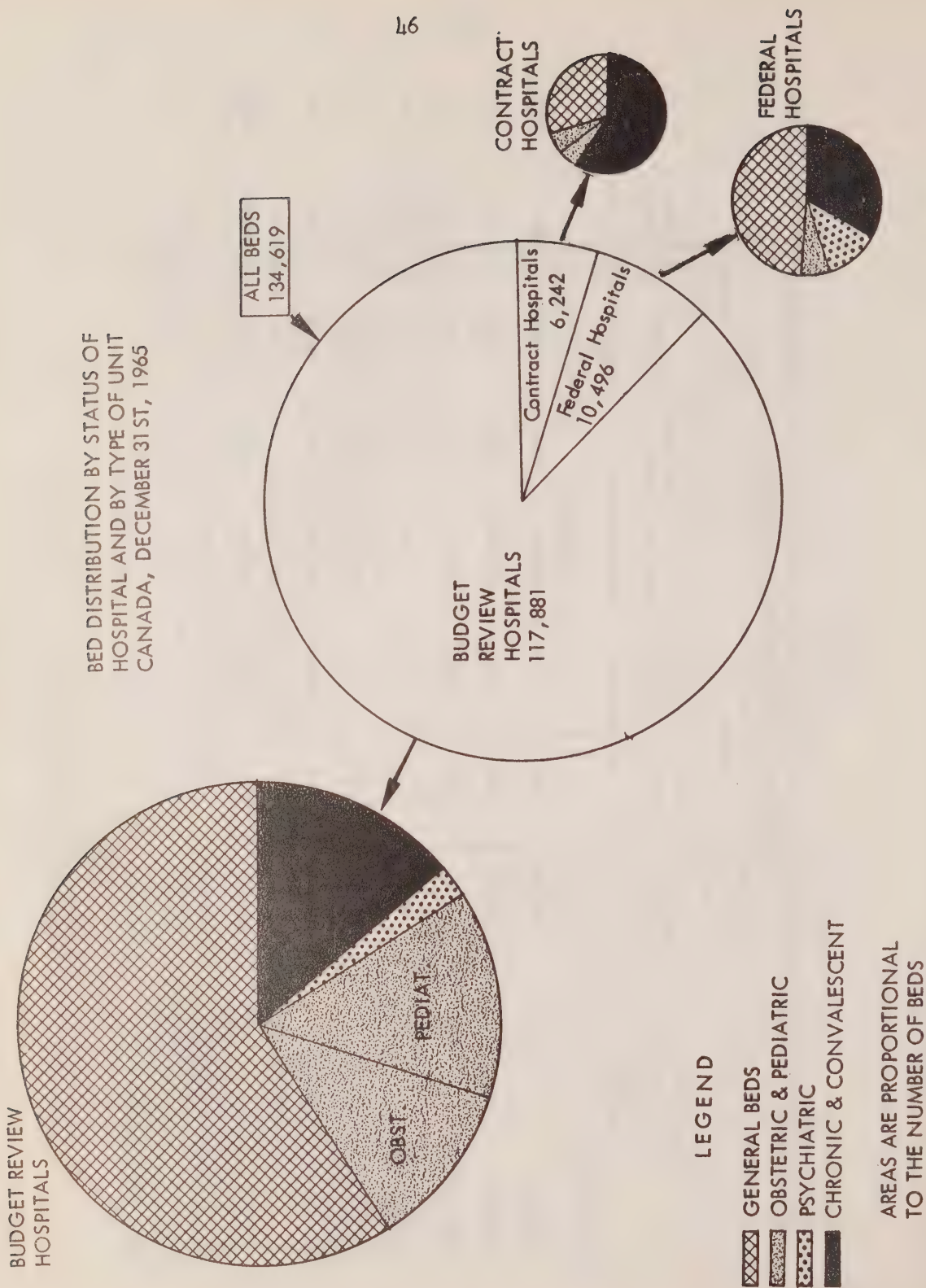


TABLE 13

AVERAGE PERCENTAGE OCCUPANCY IN HOSPITALS LISTED IN HOSPITAL INSURANCE AGREEMENTS BY STATUS AND TYPE OF HOSPITAL, CANADA, 1961-1965.

Status and Type of Hospital	1961	1962	1963	1964	1965
Budget review general	80.3	80.3	80.3	80.5	80.5
Budget review chronic	93.6	94.5	92.1	85.7	91.4
Budget review convalescent	84.7	83.6	80.9	88.6	82.4
Other budget review	77.7	75.0	78.3	75.3	71.6
All budget review	81.2	81.4	81.0	81.2	81.4
Contract	76.2	80.5	82.1	79.9	80.3
Government of Canada	75.4	75.8	73.9	75.8	76.3

Source: Table A 14 and annual reports.

TABLE 14

AVERAGE PERCENTAGE OCCUPANCY IN BUDGET REVIEW GENERAL HOSPITALS,
CANADA AND PROVINCES, 1961-1965.

PROVINCE	1961	1962	1963	1964	1965
Newfoundland	81.2	77.3	74.6	79.8	78.0
Prince Edward Island	69.8	71.2	76.0	76.0	77.1
Nova Scotia	77.6	77.7	75.7	78.6	75.6
New Brunswick	84.3	81.5	80.9	80.1	81.4
Quebec	80.7	81.4	81.3	81.3	81.5
Ontario	82.3	82.3	82.3	82.5	82.9
Manitoba	77.4	78.2	78.4	79.9	78.5
Saskatchewan	76.0	74.5	77.8	76.5	75.9
Alberta	76.4	76.3	74.1	75.2	74.4
British Columbia	81.0	82.0	82.2	81.2	81.8
Yukon	41.7	41.2	39.2	32.6	30.0
Northwest Territories	44.2	41.5	61.7	49.5	55.5
CANADA	80.3	80.3	80.3	80.5	80.5

Source: Table A 14 and annual reports

c) Newborn

Data on hospital care of the newborn are excluded from the tables on beds, admissions, separations, hospital stay, and diagnosis, and are given in Tables 15 and A16.

In 1965, the number of separations of the newborn was 6.2 per cent less and the number of patient-days 5.5 per cent less than in 1964, while the total number of children born in Canada was 7.6 per cent less than in 1964. The average length of stay in hospital had remained constant at 6.7 days since 1963. Among the provinces, the average number of days of care (based on patient-days since admission) ranged from 5.5 in Newfoundland to 7.3 in British Columbia (Table A16).

3. Expenditures of Budget Review Hospitals

Budget review hospitals accounted for seven-eighths of all patient-days in hospitals that are listed under the Act. This Section deals with the operating (revenue fund) expenditures of these hospitals; it excludes capital outlays.

Expenditure increased by 13 per cent to 1,109 million dollars in 1965 from 982 million in 1964. Of this increase, Quebec and Ontario accounted for 72 per cent.

The annual increases from the preceding year for the years 1962 to 1965 were 12.5, 12.2, 11.8, and 13.0 per cent respectively; this corresponds to an average of 12.4 per cent annual increase over the four years.

Annual changes in expenditure from the preceding year for each province are shown in Table 16. The average annual per cent increases for the period 1962 to 1965 were as follows: Newfoundland 18, Quebec 17, Ontario and Alberta 12, Nova Scotia 11, New Brunswick 9, and the other provinces 8.

On the average, 65 per cent was spent on salaries, 3 per cent on other medical supplies, 4 per cent on drugs, 5 per cent on food, and 23 per cent on other items. In the four Atlantic provinces, the proportion of salaries varied between 53 to 59 per cent; the average for the region was 57 per cent. Elsewhere the range of the provincial proportions for salaries was between 63 and 67 per cent (Table A20).

Apart from general price inflation, qualitative and quantitative changes in the services that hospitals provide have contributed to the increase in expenditures. The quantitative changes over the period

TABLE 15

NEWBORN IN HOSPITALS LISTED IN HOSPITAL INSURANCE AGREEMENTS:
HOSPITALS, BASSINETS, PATIENT-DAYS, SEPARATIONS, AND LENGTH OF STAY,
CANADA, 1961-1965

ITEM	1961	1962	1963	1964	1965
Hospitals reporting bassinets	933 ⁽¹⁾	972	979	1,000	977
Bassinets	16,135	17,604	18,020	18,190	18,068
Patient-days during year	2,781,363	2,965,055	3,045,352	2,978,650	2,813,508
Separations	438,728	456,185	454,485	446,153	418,269
Average length of stay	6.3	6.5	6.7	6.7	6.7

(1) Many hospitals in Quebec did not report bassinets set up at December 31, 1961.

Source: Table A 16 and annual reports

TABLE 16

REVENUE FUND EXPENDITURES OF BUDGET REVIEW HOSPITALS,
CANADA AND PROVINCES, 1961-1965

PROVINCE	1961		1962		1963		1964		1965	
	Amount	Per Cent Gain over 1961	Amount	Per Cent Gain over 1961	Amount	Per Cent Gain over 1962	Amount	Per Cent Gain over 1963	Amount	Per Cent Gain over 1964
Newfoundland	10,503,086	15.9	12,170,769	15.9	13,871,005	14.0	16,510,131	19.0	20,561,720	24.5
Prince Edward Island	3,196,662	4.6	3,343,693	4.6	3,591,564	7.4	3,976,124	10.7	4,299,051	8.1
Nova Scotia	24,911,388	9.8	27,355,067	9.8	30,366,474	11.0	34,270,153	12.9	37,618,867	9.8
New Brunswick	23,752,195	9.8	26,084,877	9.8	28,998,366	11.2	31,220,584	7.7	32,891,908	5.4
Quebec	181,950,631	16.6	212,216,642	16.6	247,140,470	16.5	285,304,571	15.4	338,465,008	18.6
Ontario	258,880,912	13.0	292,542,269	13.0	325,987,569	11.4	362,682,132	11.3	401,415,050	10.7
Manitoba	35,744,290	9.1	38,992,907	9.1	42,915,730	10.1	45,201,540	5.3	49,387,202	9.3
Saskatchewan	40,063,624	5.4	42,216,251	5.4	46,029,533	9.0	50,803,179	10.4	54,825,116	7.9
Alberta	51,678,260	12.2	57,958,355	12.2	64,752,983	11.7	72,389,591	11.8	80,230,606	10.8
British Columbia	64,543,328	7.0	69,074,366	7.0	73,998,737	7.1	78,878,007	6.6	88,864,234	12.7
Yukon	165,771	9.0	180,728	9.0	175,085	-3.1	155,875	-11.0	147,429	-5.5
Northwest Territories	244,400	4.2	254,753	4.2	275,551	8.2	270,113	-2.0	416,708	54.3
CANADA	695,634,547	12.5	782,390,677	12.5	878,103,067	12.2	981,662,000	11.8	1,109,122,899	13.0

Source: Table A 17 and Annual Reports.

1961 to 1965 result from the 7 per cent increase of the population of Canada as well as from the greater extent to which people use hospitals; for the number of patient-days per 1,000 population increased by 4 per cent over the same period (Table 4). Qualitative changes are reflected in the increase in the number of paid hours of work per patient-day of 10 per cent, and in the increase of expenditures per patient-day excluding salaries and food (i. e., that component which comprises medical supplies, drugs and other revenue-fund expenses), which was 42 per cent over the period.

Total cost per patient-day had increased by 9.8 per cent from \$29.23 in 1964 to \$32.09 in 1965; it ranged from \$24.41 in Prince Edward Island to \$36.95 in Quebec. Quebec also shows the highest increase over 1964, 14.3 per cent, followed by Newfoundland where the cost had risen by 10.3 per cent to \$28.91. In all other provinces the increase over 1964 was below the 9.8 per cent average (Table 17).

Over the period from 1961 to 1965 the average annual rise of the cost per patient-day was 9 per cent in Canada as a whole, 13 per cent in Quebec, 10 per cent in Newfoundland, 8 per cent in Nova Scotia, and 6 to 7 per cent in the other provinces.

The items that contributed to the increase in the cost per patient-day of \$2.86 from \$29.23 in 1964 to 32.09 in 1965 were as follows: salaries \$2.05, medical and surgical supplies 7¢, drugs 10¢, food 4¢, and other expenses 60¢ (Tables 17 and A18).

Dividing the expenditure of budget review hospitals of a province by the population yields "per capita cost" for these hospitals which allows quantitative comparisons of provinces to be made and shows changes from year to year that are independent of changes in the number of residents. There are however some limitations. Budget review hospitals provided only part of the service. In 1961, the number of their patient-days was 85 per cent, and in 1965, 88 per cent of the total patient-days of all the hospitals listed under the Act. For 1965, the proportion varies between provinces from 83 per cent in British Columbia to 100 per cent in Prince Edward Island.

The average annual increases in per capita cost from the previous year for 1962 to 1965 were as follows: Newfoundland, 16 per cent (with the cost per resident the second lowest at \$41.29, which is \$15.38 below the average); Quebec, 15 per cent (with cost in 1965 to \$59.83, the highest of all provinces and \$3.16 above the average); in Nova Scotia, 10 per cent; in Ontario and Alberta, 9 per cent; in Prince Edward Island, New Brunswick, Manitoba, and Saskatchewan, 7 per cent; and in British Columbia, 6 per cent (Table 18).

TABLE 17

REVENUE FUND EXPENDITURE OF BUDGET REVIEW HOSPITALS PER PATIENT-DAY,
EXCLUDING NEWBORN, CANADA AND PROVINCES, 1961-1965.

PROVINCE	1961	1962	1963	1964	1965
	\$	\$	\$	\$	\$
Newfoundland	20.00	21.69	23.34	26.20	28.91
Prince Edward Island	19.04	18.80	20.46	22.65	24.41
Nova Scotia	23.66	25.37	27.36	29.36	32.06
New Brunswick	23.72	25.57	27.51	28.64	29.98
Quebec	22.63	25.58	28.84	32.32	36.95
Ontario	24.26	26.14	27.97	29.82	32.14
Manitoba	21.94	23.18	24.89	25.47	27.90
Saskatchewan	21.18	22.82	23.41	25.84	27.72
Alberta	20.42	21.65	23.28	24.45	26.08
British Columbia	23.85	25.50	26.42	27.98	30.55
Yukon	29.43	33.41	45.32	50.25	51.73
Northwest Territories	34.45	38.24	27.80	33.87	30.24
CANADA	23.01	25.03	27.06	29.23	32.09

Source: Table A18 and annual reports.

TABLE 18

REVENUE FUND EXPENDITURES OF BUDGET REVIEW HOSPITALS PER CAPITA⁽¹⁾
CANADA AND PROVINCES, 1961-1965

PROVINCE	1961	1962	1963	1964	1965
	\$	\$	\$	\$	\$
Newfoundland	22.94	25.89	28.84	33.63	41.29
Prince Edward Island	30.55	31.54	33.57	37.16	39.81
Nova Scotia	33.80	36.67	40.17	45.09	49.43
New Brunswick	39.72	42.97	47.23	50.60	52.80
Quebec	34.60	39.55	45.20	51.30	59.83
Ontario	41.51	46.13	50.56	55.07	59.64
Manitoba	38.78	41.70	45.17	47.18	51.34
Saskatchewan	43.30	45.39	49.33	53.87	57.65
Alberta	38.80	42.30	46.09	50.55	55.29
British Columbia	39.61	41.64	43.66	45.38	49.67
Yukon	11.33	12.05	11.67	9.74	9.83
Northwest Territories	10.63	10.61	11.48	10.80	16.67
CANADA	38.14	42.13	46.47	51.04	56.67

(1) Based on the "Census of Canada", 1961 and population estimates of the Dominion Bureau of Statistics as on June 1st

Source: Table A19 and annual reports.

Since these expenditures refer only to budget review hospitals, differences between provinces reflect not only differences in prices of labour and utilization, but also the fact that some provinces provide much geriatric and convalescent care in contract hospitals, while others have very little of this type of care in either contract hospitals or budget-review hospitals.

4. Characteristics of Patients

Each province gathers data about patients in hospitals. The provinces then supply these data, or, more properly stated, tabulations based upon them, to this Department. The provinces do not all report their data on characteristics of patients in precisely the same form, but for the most part the differences are minor and do not significantly reduce the validity of the statistics. (1)

a) Age and Sex

The contrast between youth and age in terms of the amount of hospital care each uses is shown in Table 19. The young are in hospital less often ("separations per 1,000 population", in the language of the table), when there they stay more briefly, and they require relatively fewer days of care in a year ("days since admission per 1,000 population"). On the other hand, the very young need more hospital care than those between five and fourteen years of age.

For all age groups combined, frequency of separation from hospital rose by 6 per cent between 1961 and 1965. Whereas 150 persons in each 1,000 were separated from hospital over the course of 1961, 159 were separated in 1965. The age groups 0-4, 45-64, and 65+ had increases greater than all ages taken together, with the increase in the 65+ age group being the largest of all at 17 per cent. The 15-24 group had a 4.4 per cent reduction.

Persons in hospital in 1965 tended to stay longer than they had in 1961. There was a marked contrast between the age groups in this regard. In 1961 the average patient-stay in hospital was 10.9 days, rising to 12.0 days in 1964 and easing down to 11.8 the next year. Those aged 65 or more were staying considerably longer than the general average and their stay had been increasing more rapidly between 1961, when it was 24.9 days, and 1964, when it reached

(1) In some provinces only insured hospitalization data are reported; in other provinces data for non-insured hospitalization are also included. Also, in some cases, where one province paid for care in another, both may have included the data in their statistics.

TABLE 19
SEPARATIONS AND DAYS OF CARE SINCE ADMISSION PER 1,000 POPULATION, AND AVERAGE LENGTH OF STAY, BY AGE,
FOR PATIENTS INSURED BY PROVINCIAL PLANS, CANADA, 1961-1965

	0-4 ⁽¹⁾	5-14	15-24	25-44	45-64	65+	Age Unknown	All Ages ⁽¹⁾
Separations per 1,000 population								
1961	150.9	83.1	165.2	169.4	143.8	254.0	-	150.0
1962	155.8	82.5	172.2	178.3	162.8	269.2	-	156.4
1963	155.8	81.5	167.2	176.6	155.6	277.2	-	156.0
1964	163.0	83.9	167.3	180.9	163.0	289.9	-	160.9
1965	166.3	83.0	157.9	174.5	165.4	297.4	-	158.9
Days since admission per 1,000 population								
1961	1,218.9	497.5	1,106.1	1,380.5	2,100.0	6,317.6	-	1,633.3
1962	1,319.7	501.2	1,168.8	1,508.8	2,332.2	7,430.8	-	1,813.5
1963	1,291.2	485.4	1,130.7	1,487.9	2,379.6	7,726.8	-	1,824.8
1964	1,350.9	501.8	1,140.5	1,563.6	2,537.4	8,410.9	-	1,937.5
1965	1,387.6	497.8	1,078.2	1,517.5	2,491.2	8,031.9	-	1,882.4
Average length of stay, ⁽²⁾								
1961	8.1	6.0	6.7	8.2	14.6	24.9	10.8	10.9
1962	8.5	6.1	6.8	8.5	15.3	27.6	11.9	11.6
1963	8.3	6.0	6.8	8.4	15.3	27.9	9.7	11.7
1964	8.3	6.0	6.8	8.6	15.6	29.0	11.2	12.0
1965	8.3	6.0	6.8	8.7	15.1	27.0	11.9	11.8

⁽¹⁾ Excludes newborn

⁽²⁾ Patient-days since admission divided by number of separations

Source: Data supplied to the Department by Provincial Plans

29.0 days; it fell to 27.0 in 1965. On the other hand, children between 5 and 14 stayed 6.0 days in 1961 and in 1965, and persons between 15 and 24 stayed, in the average, 6.7 or 6.8 days throughout the period.

The rate of use of hospital care by persons in each age group can be expressed in terms of days per thousand persons per year.

For all ages combined this figure rose from just over 1,600 in 1961, to just over 1,900 in 1964 and fell to 1,882 in 1965. Every age group but one showed an increase in 1965 compared with 1961, although in no case was the increase uninterrupted over the intervening years; this upward trend probably reflects mainly the inclusion under the insurance program of increased amounts of facilities for long-term care. The sharpest rise was the 27 per cent increase among persons 65 or over and the decrease was the 2.5 per cent reduction among the persons aged 15 to 24.

Figure 2 sets out those rates of use as they existed in 1965. Particularly notable is the fact that the age group 65+ has a rate higher than any other age group and that children under 5 have a higher rate than children between 5 and 14. In connection with the last mentioned point it should be noted that newborn are not included.

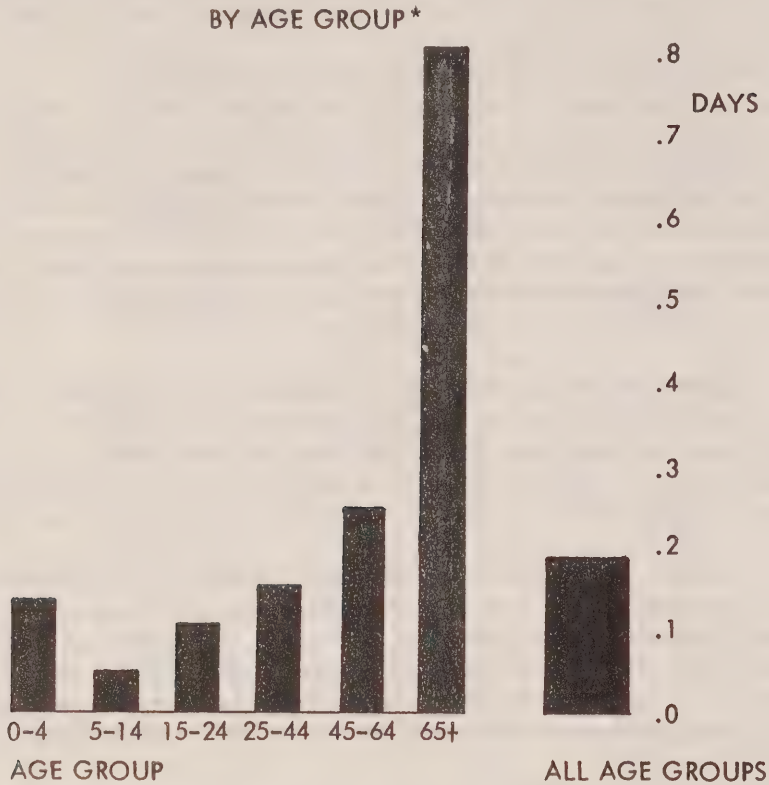
Females accounted for 1,850,000 discharges and deaths during 1965 as against only 1,250,000 for males, but the large difference can be attributed almost entirely to the 553,000 cases of conditions related to pregnancy. If these cases are deducted, the overall female rate of 190.9 separations for each 1,000 population is reduced to 134.0, as against the rate of 127.4 for males (Tables 20 and A21).

There was a slight increase in the frequency of being in hospital for males between 1964 and 1965, the rate having been 126.7 cases per thousand population in the earlier year. The female rate in the meantime fell from 195.6 to 190.9. However, the number of cases associated with pregnancy was 596,000 in 1964 but only 553,000 in 1965. Apart from such cases, the female rate increased from 133.1 to 134.0 per thousand population over the same period.

Females in hospitals stayed there for shorter periods than males did, having an average stay of 11.2 days compared with 12.7. Once again the difference can be considered as mainly due to conditions associated with pregnancy, for which the average stay was only 5.8 days. The average stay of females in other diagnostic categories was 13.6 days (Table 20).

FIGURE 2

DAYS OF HOSPITAL CARE, PER PERSON, 1965.



EXCLUDES NEWBORN

*For each age group, the number of patient-days since admission for patients that left hospital in 1965 (discharges and deaths) was divided by the number of people in the general population.

TABLE 20

SEPARATIONS AND DAYS OF CARE SINCE ADMISSION, NUMBER AND RATES PER 1,000 POPULATION AND AVERAGE LENGTH OF STAY FOR PATIENTS INSURED BY PROVINCIAL PLANS, AND POPULATION OF CANADA BY SEX AND AGE, CANADA, 1965.

	0-4 ⁽¹⁾	5-14	15-24	25-44	45-59	60-64	65-74	75+	Age Unknown	All Ages
Separations										
Male	216,459	190,374	120,506	221,708	209,514	69,226	123,065	104,587	1,262	1,256,701
Female	159,406	162,810	377,873	638,268	235,520	61,204	115,007	101,771	1,634	1,853,493
Total	375,865	353,184	498,379	859,976	445,034	130,430	238,072	206,358	2,896	3,110,194
Separations per 1,000 population										
Male	187.2	87.5	75.2	89.7	146.5	216.3	278.1	398.1	-	127.4
Female	144.4	78.4	243.2	260.1	167.1	191.5	239.1	329.9	-	190.9
Total	166.3	83.0	157.9	174.5	156.7	203.9	257.8	361.3	-	158.9
Patient-days since admission										
Male	1,794,659	1,169,945	976,553	2,289,853	3,011,121	1,206,913	2,599,224	2,937,613	14,682	16,000,563
Female	1,341,280	947,833	2,426,608	5,187,063	3,314,347	1,135,169	2,716,633	3,750,953	19,892	20,839,778
Total	3,135,939	2,117,778	3,403,161	7,476,916	6,325,468	2,342,082	5,315,857	6,688,566	34,574	36,840,341
Days since admission per 1,000 population										
Male	1,552.5	537.6	609.2	926.1	2,105.8	3,770.4	5,874.0	11,182.4	-	1,622.3
Female	1,215.0	456.2	1,562.0	2,113.5	2,351.3	3,551.8	5,649.1	12,158.7	-	2,146.6
Total	1,387.6	497.8	1,078.2	1,517.5	2,227.7	3,661.2	5,756.8	11,709.7	-	1,882.4
Average length of stay ⁽²⁾										
Male	8.3	6.1	8.1	10.3	14.4	17.4	21.1	28.1	11.6	12.7
Female	8.4	5.8	6.4	8.1	14.1	18.5	23.6	36.9	12.2	11.2
Total	8.3	6.0	6.8	8.7	14.2	18.0	22.3	32.4	11.9	11.8
Population (in thousands) ⁽³⁾										
Male	1,156.0	2,176.1	1,602.9	2,472.7	1,429.9	320.1	442.5	262.7	-	9,862.9
Female	1,103.9	2,077.8	1,553.5	2,454.3	1,409.6	319.6	480.9	308.5	-	9,708.1
Total	2,259.9	4,253.9	3,156.4	4,927.0	2,839.5	639.7	923.4	571.2	-	19,571.0

(1) Excludes newborn

(2) Patient-days since admission divided by number of separations

(3) Estimate by the Dominion Bureau of Statistics as at June 1st, 1965

Source: Data supplied to the Department by Provincial Plans

The rate of separation from hospital per 1,000 population among females in age groups from 15 to 59 exceeds the rate for males. Before age 15 and after age 59 the male rates were markedly higher than the female.

The average length of periods of treatment in hospital was shorter for females than for males in each age group from 5 up to 59, the difference being largest in the 25-44 group. After age 59, however, the female average stay is longer than the male, and above age 74 it reaches 36.9 days, or almost one-third larger than the male average of 28.1 days.

b) Diagnosis

Table 21 shows the ranking of the 10 categories from the Canadian List of 98 Diagnoses that accounted for the greatest number of discharges or deaths of patients in 1965 and gives the ranking of these categories in the three preceding years. It will be observed that the five most numerous diagnoses listed were almost unchanged in rank over the reporting period. Respiratory infection and gastroenteritis appeared in the group for the first time in 1965, having displaced among the ten top-ranking diagnoses appendicitis, formerly ninth, and abortion, formerly tenth.

Table A-21 provides data for each diagnosis in the Canadian List, giving data on number of cases, total days, and average stay. It is revealing to compare the data in this table with corresponding data for 1964.

With regard to the caseload, here measured in terms of separations, they show that of the ninety-four tabulated categories⁽¹⁾ 69 were more numerous and 25 less numerous in 1965 than in 1964. The proportionately large increase was in the category malignant neoplasm of cervix uteri, which was 18.5 per cent more numerous in 1965, with 8,936 cases, than in 1964, when there had been 7,538. A 12.1 per cent increase was recorded for psychosis, and 11.8 per cent increase for internal injuries of chest, abdomen, and pelvis, and a 10.2 per cent increase for nephritis and nephrosis. At the

(1) The four categories omitted from the table are those dealing with diagnostic cases, cases of examination only, live births, and stillbirths. An adjustment has been made for the one major statistical deviation that has been identified. This deviation arose from the fact that in 1964 and 1965 in Ontario cases of childbirth involving the use of forceps were included under "delivery with specified complications", instead of, as they should have been, under "delivery without mention of complications". The data have been adjusted by distributing the total of the two categories in proportion to the numbers in each in 1963. The deviation will continue for 1966, having been noted after the coding of 1966 data was begun.

TABLE 21

TEN LEADING DIAGNOSTIC CATEGORIES (CANADIAN LIST OF 98 DIAGNOSES) AMONG SEPARATIONS OF PATIENTS INSURED BY PROVINCIAL PLANS⁽¹⁾, NUMBER, RANK, AND PERCENTAGE, DISTRIBUTION, CANADA, 1962 - 1965

Canadian List No.	Diagnosis	1965			1964			1963			1962 (2)		
		Number	Rank	Per Cent	Number	Rank	Per Cent	Number	Rank	Per Cent	Number	Rank	Per Cent
75	Delivery without mention of complications	376,562 ⁽³⁾	1	12.2	409,564 ⁽³⁾	1	13.3	413,213	1	14.1	385,812	1	14.1
50	Hypertrophy of tonsils and adenoids	196,741	2	6.4	200,408	2	6.5	196,834	2	6.7	174,693	2	6.4
38	Arteriosclerotic and degenerative heart disease	106,474	3	3.4	102,810	3	3.3	93,449	4	3.2	82,867	4	3.0
48	Pneumonia	102,119	4	3.3	99,619	4	3.2	99,457	3	3.4	83,006	3	3.0
73	Complications of pregnancy	78,438	5	2.5	80,821	5	2.6	79,180	5	2.7	70,792	5	2.6
61	Diseases of gallbladder and pancreas	75,508	6	2.4	71,727	6	2.3	63,983	6	2.2	55,303	7	2.0
56	Hernia of abdominal cavity	68,723	7	2.2	65,801	7	2.1	61,992	8	2.1	56,157	6	2.1
49	Bronchitis	62,257	8	2.0	58,256	8	1.9	54,819	10	1.9	49,384	10	1.8
46	Acute upper respiratory infections	53,889	9	1.7	49,013	13	1.6	47,374	13	1.6	43,094	11	1.6
58	Gastroenteritis and colitis, except ulcerative, age 4 weeks and over	52,310	10	1.7	49,952	11	1.6	48,032	12	1.6	42,048	12	1.5
	Other diagnoses	1,919,647	-	62.1	1,886,096	-	61.4	1,771,266	-	60.5	1,690,260	-	61.8
	All diagnoses (1-94)	3,092,668	-	100.0	3,074,067	-	100.0	2,929,599	-	100.0	2,733,415	-	100.0

(1) Certain residual and heterogeneous categories are excluded from the ranking (See Table A 21).

(2) Excludes Newfoundland, Nova Scotia, and New Brunswick

(3) Figure estimated to offset a coding variation in Ontario

Source: Data supplied to the Department by Provincial Plans

other extreme were reductions of 6.5 per cent for cirrhosis, 8.1 per cent for delivery without mention of complications, 9.1 per cent for abortion, and 11.6 per cent for certain diseases of early infancy. The sharpest reduction occurred in infectious hepatitis, of which there were 5,729 cases in 1964 and only 4,606 in 1965, for a reduction of 19.6 per cent in one year.

Some marked changes in the length of stay of patients leaving hospital occurred between 1964 and 1965, with 17 diagnostic categories reflecting changes in their average lengths of stay of a full day or more.

Only one category, tuberculosis, had an increase of this size. For this disease the average stay was 18.8 days in 1964 and 21.2 days in 1965. In view of the concentration of tuberculosis treatment in sanatoria, this statistic does not indicate a significant change in the overall treatment of tuberculosis, but is rather a result of administrative arrangements.

Several categories had large reductions in average stay between 1964 and 1965. Among the largest of these reductions were those reported for diseases of the central nervous system (down from 59.4 to 45.2 days), poliomyelitis (down from 40.7 days to 33.9 days), arterial disease (down from 45.5 days to 40.9 days), and hypertension (down from 21.4 to 18.0 days).

In considering these statistics, which are based upon hospital experience, the reader must constantly remember that the statistics do not represent anything like the total incidence in the population. They are confined to that portion of that incidence that is cared for in hospital. Obviously this portion will vary greatly from disease to disease, so that it is almost impossible to extrapolate from these data to a valid over-all measure of illness in the community.

5. Hospital personnel

The number of persons employed in hospital continued to rise in 1965, as shown in Table 22. From 186,000 full-time employees in 1961 the figure had increased by 24.2 per cent to 231,000 four years later. If part-time employees be taken into the reckoning on the basis of two part-time employees being equivalent to one full-time employee, the rise is from 196,000 to 245,000 or by 25.1 per cent over the same four years.

The causes of this increase, which brings the hospital work-force to some 3.4 per cent of the total labour force in Canada, are that beds in hospitals became more numerous, employees in hospital worked fewer hours, and hospital care became more intensive. The available statistics

TABLE 22

PERSONNEL IN LISTED HOSPITALS, FULL-TIME AND PART-TIME, CANADA AND PROVINCES,
1961-1965

PROVINCE	Number of Hospitals Reporting					Full-Time					Part-Time				
	1961	1962	1963	1964	1965	1961	1962	1963	1964	1965	1961	1962	1963	1964	1965
Newfoundland	42	43	45	46	47	3,004	3,129	3,494	4,473	4,637	146	104	332	209	168
Prince Edward Island	9	9	9	9	9	908	931	938	945	1,032	72	47	69	74	85
Nova Scotia	48	48	48	48	48	7,452	7,531	7,954	8,245	8,467	516	792	606	607	830
New Brunswick	40	39	40	42	40	6,715	6,893	7,374	7,552	7,673	530	389	397	591	666
Quebec	243	262	268	269	268	51,503	56,169	60,370	64,870	71,258	4,812	4,911	4,819	5,135	6,071
Ontario	325	321	318	319	314	66,466	70,205	73,835	77,015	80,348	9,172	10,537	11,134	12,430	13,424
Manitoba	100	101	103	104	101	10,053	10,604	11,096	11,294	11,395	1,431	1,410	1,653	1,685	2,092
Saskatchewan	160	160	159	156	158	10,310	10,389	10,751	11,072	11,352	709	734	989	1,189	1,291
Alberta	122	126	132	137	141	13,982	14,635	15,538	16,381	16,903	954	1,095	1,260	1,569	1,699
British Columbia	111	111	111	111	119	15,298	15,534	15,938	16,410	17,537	1,753	1,572	1,709	1,916	2,175
Yukon	3	3	3	5	5	139	158	147	153	152	36	64	33	9	5
Northwest Territories	22	19	25	26	25	242	189	343	362	337	22	83	43	91	59
CANADA	1,225	1,242	1,261	1,272	1,275 ⁽¹⁾	186,072	196,367	207,778	218,772	231,091	20,153	21,738	23,044	25,505	28,565

(1) Fifteen hospitals did not report personnel.

Source: Table A22 and annual reports.

TABLE 23

PERSONNEL IN LISTED HOSPITALS, FULL-TIME AND PART-TIME BY PROFESSION,
CANADA, 1965

Category	Full-Time	Part-Time	Total	Per Cent of Total Personnel
EMPLOYEES (Except Trainees)				
A. Medical	1,650	2,717	4,367	1.7
B. Nursing				
1 - Graduate nurses	47,190	9,863	57,053	22.0
2 - Qualified nursing assistants	17,846	1,655	19,501	7.5
3 - Orderlies	9,201	389	9,590	3.7
4 - Other	26,366	3,148	29,514	11.4
TOTAL	100,603	15,055	115,658	44.5
C. Other professional and technical				
1 - Hospital administrators	1,303	135	1,438	.6
2 - Dietitians	913	137	1,050	.4
3 - Medical record librarians	945	126	1,071	.4
4 - Laboratory technicians	5,158	542	5,700	2.2
5 - Radiological technicians	2,577	191	2,768	1.1
6 - Combined lab. and radiological technicians	610	75	685	.3
7 - Physiotherapists	1,136	203	1,339	.5
8 - Occupational therapists	311	46	357	.1
9 - Pharmacists	771	220	991	.4
10 - Psychologists	99	62	161	.1
11 - Social Workers	428	86	514	.2
TOTAL	14,251	1,823	16,074	6.2
D. Other personnel	79,780	8,817	88,597	34.1
TOTAL EMPLOYEES (Except Trainees)	196,284	28,412	224,696	86.5
TRAINEES				
A. Medical				
1 - Residents and senior interns	3,237	77	3,314	1.3
2 - Junior interns	1,211	76	1,287	.5
TOTAL	4,448	153	4,601	1.8
B. Nursing				
1 - Student nurses	23,573	—	23,573	9.1
2 - Nursing assistants	4,413	—	4,413	1.7
TOTAL	27,986	—	27,986	10.8
C. Other professional and technical				
1 - Medical record librarians	80	—	80	*
2 - Laboratory technicians	1,121	—	1,121	.4
3 - Radiological technicians	1,172	—	1,172	.5
TOTAL	2,373	—	2,373	.9
TOTAL TRAINEES	34,807	153	34,960	13.5
TOTAL PERSONNEL	231,091	28,565	259,656	100.0

* Less than 0.05.

Source: Table A22.

make possible a crude evaluation of the relative importance of these factors. Beds increased by 11.2 per cent (Table 10). Hours per employee decreased by 1.2 per cent (unpublished statistics). Intensity of care, measured in terms of man-hours required to provide one day of patient care, increased by 10.4 per cent (Table 24). The relative importance of these factors may be calculated as follows:

Factor	Percentage change in factor 1961-1965	Percentage staff change to be expected	Proportional attribution of staff increase
Number of beds	+11.21	+11.21	49.1
Hours per employee	- 1.24	+ 1.25	5.5
Intensity of care (man-hours per day of care)	+10.36	+10.36	45.4
Error of estimate	-	+ 2.28	(a)
Number of employees	+25.10	+25.10	100.0

(a) Error proportionally distributed.

From the final column of the above table we can observe that the increased number of beds accounted for 49 per cent, and increased intensity of care for 46 per cent, of the increase in the size of the staff between 1961 and 1965, while the reduction in the number of hours per employee accounted for a little more than 5 per cent.

The 25.1 per cent increase in full-time or equivalent⁽¹⁾ personnel between 1961 and 1965, and the 6.0 per cent increase between 1964 and 1965 reflect increases in every province.⁽²⁾ Between 1961 and 1965 increases in individual provinces ranged from 53 per cent in Newfoundland to 12 per cent in Saskatchewan, with only two provinces (Newfoundland and Quebec) having percentage increases larger than the national average. In the single year from 1964 to 1965 the provincial increases ranged from 10 per cent in Quebec to 2 per cent in New Brunswick. In this case, Prince Edward Island and British Columbia also had increases above that for Canada as a whole.

(1) On the basis of two part-time employees being equivalent to one full-time.

(2) There were decreases in the Yukon between 1961 and 1965 and between 1964 and 1965, and in the Northwest Territories between 1964 and 1965.

TABLE 24

HOURS OF WORK IN BUDGET REVIEW GENERAL HOSPITALS,
TOTAL AND PER PATIENT-DAY FOR NURSING AND OTHER PERSONNEL,
CANADA, 1961-1965

Year	Total	Nursing Personnel	Other Personnel
TOTAL			
1961	328,165,256	173,553,050	154,612,206
1962	352,796,076	192,910,088	159,885,988
1963	372,316,575	207,648,065	164,668,510
1964	396,390,105	221,053,077	175,337,028
1965	414,818,648	229,999,868	184,818,780
PER PATIENT-DAY			
1961	12.65	6.69	5.96
1962	12.95	7.08	5.87
1963	13.17	7.35	5.83
1964	13.59	7.58	6.01
1965	13.96	7.74	6.22

Source: Table A 25.

A classification of personnel by occupation is provided in Table 23. There were more personnel in virtually every occupation in 1965 than in 1964, ⁽³⁾ and the increase was relatively more rapid, for the most part, among the professionally and technically highly skilled than among the less trained staff. Thus, medical, nursing, and other professional and technical employees accounted for 9,334, or 67 per cent, of the overall 13,848 increase between 1964 and 1965, although these groups together had made up only 51 per cent of the total work-force in hospitals in 1964.

Among particularly large proportionate increases in numbers of staff between 1964 and 1965 were the following: medical record librarians, 8.5 per cent; laboratory technicians, 12.4 per cent; physiotherapists, 12.9 per cent; psychologists, 12.1 per cent; and trainee nursing assistants, 18.6 per cent. The only group with a reduction was trainee medical record librarians, which numbered 95 in 1964 and only 80 in 1965, a drop much more than offset by the increase in qualified medical record librarians from 929 to 1,008 in the same interval.

Table 24 sets out the number of hours worked during the year by all the staff and by the nursing staff, and the relationship of the totals to the number of patient-days. Nursing staff accounted for 55.4 per cent of the total hours worked in 1965, slightly less than their 55.8 in the two preceding years, but more than the 52.7 per cent that they accounted for in 1961. The ratios of hours of work to patient-days of care provided by all the staff and by the nursing staff considered separately increased steadily between 1961 and 1965, although the ratio for non-nursing staff increased only in 1964 and 1965. The rises in these ratios reflect increased intensity of care, and, with payrolls looming so large in hospital budgets, have major financial implications.

Additional detailed personnel data will be found in the appendix Tables A 22 to A 25.

(3) This comparison, and the numbers and percentages quoted in this section, are on the basis of two part-time employees being equivalent to one full-time employee. The 1964 data utilized in the comparisons are in Table 21 of last year's report, as corrected.

TABLE A1
PATIENT-DAYS EXCLUDING NEWBORN IN HOSPITALS LISTED IN HOSPITAL INSURANCE AGREEMENTS BY RESPONSIBILITY
FOR PAYMENT, CANADA AND PROVINCES, 1965.

PROVINCE	(a) Number of Patient-Days by Responsibility for Payment							Number of Hospitals Reporting (1)
	Provincial Plan	Insured Residents' Care, Not Responsibility of Provincial Plan	Uninsured Residents of the Province	Non-Residents of the Province	Workmen's Compensation Boards	Government of Canada	Total	
Newfoundland	595,012	28,997	—	4,240	11,454	8,013	747,716	48
Prince Edward Island	167,557	134	—	3,817	1,858	2,746	176,112	9
Nova Scotia	1,176,141	297	1,046	27,590	18,478	85,351	1,308,903	48
New Brunswick	1,079,196	111	1,443	42,159	19,001	49,894	1,191,804	40
Quebec	9,926,175	3,893	10,617	110,556	140,184	590,142	10,781,567	270
Ontario	12,861,580	238,662	166,875	216,758	249,862	517,095	14,250,832	318
Manitoba	1,767,170	1,665	1,760	67,771	25,962	121,785	1,986,113	101
Saskatchewan	2,136,074	105	12,510	35,507	19,533	36,099	2,239,828	158
Alberta	3,105,432	4	72	67,477	63,527	106,357	3,342,869	142
British Columbia	2,941,211	20,310	5,392	43,174	83,827	392,936	3,486,850	119
Yukon	20,649	120	139	1,789	854	347	23,898	5
Northwest Territories	38,340	289	1,343	3,026	1,380	18,636	63,014	26
CANADA	35,914,537	294,587	201,197	623,864	635,920	1,929,401	39,599,506	1,284

(1) Includes 7 hospitals that closed during the year.

TABLE A1 (cont'd)

PROVINCE	(b) Percentage Distribution of Patient-Days by Responsibility for Payment							Number of Hospitals Reporting
	Provincial Plan	Insured Residents' Care Not Responsibility of Provincial Plan	Uninsured Residents of the Province	Non-Residents of the Province	Workmen's Compensation Boards	Government of Canada	Total	
Newfoundland	93.0	3.9	—	.6	1.5	1.1	100.0	48
Prince Edward Island	95.1	.1	—	2.2	1.1	1.6	100.0	9
Nova Scotia	89.9	*	.1	2.1	1.4	6.5	100.0	48
New Brunswick	90.6	*	.1	3.5	1.6	4.2	100.0	40
Quebec	92.1	*	.1	1.0	1.3	5.5	100.0	270
Ontario	90.3	1.7	1.2	1.5	1.8	3.6	100.0	318
Manitoba	89.0	.1	.1	3.4	1.3	6.1	100.0	101
Saskatchewan	95.4	*	.6	1.6	.9	1.6	100.0	158
Alberta	92.9	*	*	2.0	1.9	3.2	100.0	142
British Columbia	84.4	.6	.2	1.2	2.4	11.3	100.0	119
Yukon	86.4	.5	.6	7.5	3.6	1.5	100.0	5
Northwest Territories	60.8	.5	2.1	4.8	2.2	29.6	100.0	26
CANADA	90.7	.7	.5	1.6	1.6	4.9	100.0	1,284

* Less than 0.05.

TABLE A2

PATIENT-DAYS EXCLUDING NEWBORN IN HOSPITALS LISTED IN HOSPITAL INSURANCE AGREEMENTS BY STATUS OF HOSPITAL, NUMBER AND POPULATION RATES BY PROVINCE, AND PERCENTAGE DISTRIBUTION BY STATUS OF HOSPITAL, CANADA AND PROVINCES, 1965

PROVINCE	Number				Total per 1,000 Population	Per Cent				Number of Hospitals Reporting
	Budget Review	Contract	Government of Canada	Total		Budget Review	Contract	Government of Canada	Total	
Newfoundland	711,374	33,983	2,359	747,716	1,501.4	95.1	4.5	.3	100.0	48
Prince Edward Island	176,112	—	—	176,112	1,630.7	100.0	—	—	100.0	9
Nova Scotia	1,173,437	—	135,466	1,308,903	1,720.0	89.7	—	10.3	100.0	48
New Brunswick	1,097,305	—	94,499	1,191,804	1,913.0	92.1	—	7.9	100.0	40
Quebec	9,160,877	1,007,429	613,261	10,781,567	1,905.9	85.0	9.3	5.7	100.0	270
Ontario	12,515,314	766,205	969,313	14,250,832	2,117.2	87.8	5.4	6.8	100.0	318
Manitoba	1,769,887	22,542	193,684	1,986,113	2,064.6	89.1	1.1	9.8	100.0	101
Saskatchewan	2,202,734	4,559	32,535	2,239,828	2,355.2	98.3	.2	1.5	100.0	158
Alberta	3,076,497	9,309	257,063	3,342,869	2,303.8	92.0	.3	7.7	100.0	142
British Columbia	2,908,407	11,054	567,389	3,486,850	1,949.0	83.4	.3	16.3	100.0	119
Yukon	2,850	—	21,048	23,898	1,593.2	11.9	—	88.1	100.0	5
Northwest Territories	13,779	20,506	28,729	63,014	2,520.6	21.9	32.5	45.6	100.0	26
CANADA	34,808,573	1,875,587	2,915,346	39,599,506	2,023.4	87.9	4.7	7.4	100.0	1,284

TABLE A3

PATIENT-DAYS EXCLUDING NEWBORN IN BUDGET REVIEW HOSPITALS, NUMBER AND PERCENTAGE
DISTRIBUTION BY TYPE OF ACCOMMODATION,
CANADA AND PROVINCES, 1965

PROVINCE	Number			Per Cent			Total Patient-Days
	Standard Ward	Private Rooms	Semi-private Rooms	Standard Ward	Private Rooms	Semi-private Rooms	
Newfoundland	643,164	26,610	41,600	90.4	3.7	5.8	711,374
Prince Edward Island	136,909	8,094	31,109	77.7	4.6	17.7	176,112
Nova Scotia	823,530	121,383	228,524	70.2	10.3	19.5	1,173,437
New Brunswick	710,306	97,490	289,509	64.7	8.9	26.4	1,097,305
Quebec	5,316,457	1,104,919	2,739,501	58.0	12.1	29.9	9,160,877
Ontario	7,553,725	928,591	4,032,998	60.4	7.4	32.2	12,515,314
Manitoba	1,466,245	47,141	256,501	82.8	2.7	14.5	1,769,887
Saskatchewan	1,949,489	87,855	165,390	88.5	4.0	7.5	2,202,734
Alberta	2,606,900	171,666	297,931	84.7	5.6	9.7	3,076,497
British Columbia	2,390,214	181,802	336,391	82.2	6.3	11.6	2,908,407
Yukon	2,850	—	—	100.0	—	—	2,850
Northwest Territories	13,779	—	—	100.0	—	—	13,779
CANADA	23,613,568	2,775,551	8,419,454	67.8	8.0	24.2	34,808,573

TABLE A4

SEPARATIONS EXCLUDING NEWBORN IN HOSPITALS LISTED IN HOSPITAL INSURANCE AGREEMENTS, NUMBER AND RATES PER 1,000 POPULATION, CANADA AND PROVINCES, 1961-1965.

PROVINCE	Number of Separations					Rate per 1,000 Population					Number of Hospitals Reporting				
	1961	1962	1963	1964	1965	1961	1962	1963	1964	1965	1961	1962	1963	1964	1965
Newfoundland	50,869	54,629	56,292	58,645	64,639	111.1	116.2	117.0	119.4	129.8	42	43	46	47	48
Prince Edward Island	16,202	16,934	17,079	17,334	17,726	154.9	159.8	159.6	162.0	164.1	9	9	9	9	9
Nova Scotia	109,273	110,115	110,889	114,019	114,778	148.3	147.6	146.7	150.0	150.8	48	48	48	48	48
New Brunswick	104,232	104,571	105,861	108,260	108,561	174.3	172.3	172.4	175.5	174.3	40	40	40	42	40
Quebec	722,909	745,891	771,052	788,029	797,040	137.5	139.0	141.0	141.7	140.9	275	266	271	269	270
Ontario	949,027	969,272	1,007,587	1,038,416	1,051,620	152.2	152.8	156.3	157.7	156.2	326	327	321	319	318
Manitoba	165,244	170,407	175,525	176,138	171,676	179.3	182.3	184.8	183.9	178.5	100	100	103	104	101
Saskatchewan	199,236	195,951	210,958	211,481	212,052	215.3	210.7	226.1	224.3	223.0	160	160	160	157	158
Alberta	261,244	268,690	273,509	283,387	287,440	196.1	196.1	194.7	197.9	198.1	122	126	132	138	142
British Columbia	285,744	291,650	300,939	307,080	316,285	175.4	175.8	177.5	176.7	176.8	108	109	111	111	119
Yukon	3,458	3,671	3,297	2,931	2,825	236.4	244.7	219.8	183.2	188.3	3	4	5	5	5
Northwest Territories	4,548	5,965	6,775	6,572	6,554	197.8	248.5	282.3	262.9	262.2	22	20	25	26	26
CANADA	2,871,986	2,937,746	3,039,763	3,112,292	3,151,196	157.5	158.2	160.9	161.8	161.0	1,255	1,252	1,271	1,275	1,284

TABLE A5

AVERAGE LENGTH OF STAY EXCLUDING NEWBORN IN HOSPITALS LISTED IN HOSPITAL INSURANCE AGREEMENTS BY STATUS
AND TYPES OF HOSPITAL, CANADA AND PROVINCES, 1965

PROVINCE	(a) Patient-Days Since Admission Divided by Separations						
	Budget Review				Contract	Government of Canada	All Hospitals
	General	Chronic	Convalescent	Other			
Newfoundland	11.0	-	-	56.3	42.5	4.9	11.5
Prince Edward Island	9.8	-	-	109.2	-	-	10.3
Nova Scotia	10.6	-	39.3	8.3	-	28.4	11.2
New Brunswick	10.0	49.2	-	21.7	-	47.8	11.2
Quebec	10.3	181.7	47.3	13.5	16.9	55.8	12.8
Ontario	10.9	261.0	41.6	22.9	24.6	56.7	13.8
Manitoba	9.3	121.5	-	53.0	7.8	22.0	11.5
Saskatchewan	9.5	262.4	-	-	6.3	17.9	10.3
Alberta	8.9	175.3	-	9.1	7.1	27.1	11.3
British Columbia	9.3	385.1	-	39.9	4.4	43.3	10.9
Yukon	5.9	-	-	-	-	9.2	8.6
Northwest Territories	7.2	-	-	-	10.4	11.2	9.9
CANADA	10.2	197.9	43.4	17.1	18.7	41.1	12.4

TABLE 4.5 (cont'd.)

PROVINCE	(b) Patient-Days during Year Divided by Separations						
	Budget Review				Contract	Government of Canada	All Hospitals
	General	Chronic	Convalescent	Other			
Newfoundland	11.2	-	-	57.2	43.9	4.8	11.7
Prince Edward Island	9.5	-	-	97.5	-	-	9.9
Nova Scotia	10.5	-	36.2	8.1	-	36.1	11.4
New Brunswick	10.0	54.1	-	22.8	-	34.1	11.0
Quebec	10.4	227.1	52.1	13.6	22.7	54.5	13.5
Ontario	10.9	255.7	40.7	23.2	26.4	42.5	13.6
Manitoba	9.3	123.6	-	53.3	7.9	22.2	11.6
Saskatchewan	9.5	345.6	-	-	6.4	14.1	10.6
Alberta	8.9	193.7	-	14.8	7.1	29.2	11.6
British Columbia	9.3	583.5	-	40.7	4.4	46.4	11.0
Yukon	5.8	-	-	-	-	9.0	8.5
Northwest Territories	7.4	-	-	-	10.9	10.2	9.6
CANADA	10.2	217.8	44.4	17.6	22.5	37.2	12.6

TABLE A6
PERCENTAGE DISTRIBUTION OF PATIENT-DAYS SINCE ADMISSION
BY LENGTH OF STAY, CANADA (1) AND PROVINCES, 1965

Length of Stay (in days)	Newfound- land	Prince Edward Island	New Brunswick	Quebec	Ontario	Manitoba	Saskat- chewan	Alberta	British Columbia	Yukon	Northwest Terri- tories	CANADA (1)
1	0.5	0.7	0.6	0.7	0.7	0.7	0.9	0.7	0.6	0.9	0.9	0.7
2	1.5	1.7	1.7	1.1	1.6	2.4	2.8	2.4	3.0	2.5	1.9	1.8
3	2.7	2.6	2.4	1.4	1.7	2.2	2.9	2.5	2.6	3.2	2.6	1.9
4-6	12.5	14.0	13.4	10.3	9.6	12.3	13.5	11.3	12.1	15.7	14.2	10.7
7-10	13.4	16.7	16.7	13.0	11.9	13.4	15.9	14.2	16.3	16.8	17.9	13.3
11-14	10.5	11.7	12.5	11.4	8.9	9.5	11.6	10.8	11.4	11.6	10.8	10.3
15-29	24.7	22.0	24.8	25.1	19.9	20.4	23.0	17.1	23.5	20.7	18.3	21.9
30-59	17.1	15.6	16.1	14.4	16.0	15.7	15.9	12.2	17.5	13.3	13.4	15.3
60+	17.0	15.0	11.7	22.6	29.6	23.3	13.6	28.7	13.0	15.3	20.0	24.0
TOTAL	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0

(1) Excludes Nova Scotia

TABLE A7

BUDGET REVIEW GENERAL HOSPITALS AND AVERAGE NUMBER OF DAYS OF CARE
SINCE ADMISSION FOR SEPARATIONS BY SIZE OF HOSPITAL, CANADA AND PROVINCES, 1965⁽¹⁾

PROVINCE	Number of Hospitals Reporting	Size of Hospital (Rated Bed Capacity)								1,000 and over	All Hospitals
		1-9	10-24	25-49	50-99	100-199	200-299	300-499	500-999		
Newfoundland	42	5.2	6.0	7.5	9.7	11.4	11.5	10.7	23.7	-	11.0
Prince Edward Island	8	-	11.1	7.0	6.9	10.4	10.9	-	-	-	9.8
Nova Scotia	44	8.8	7.9	8.7	9.9	10.2	11.1	10.2	14.5	-	10.6
New Brunswick	36	6.7	7.7	7.1	8.7	9.5	9.9	12.4	14.8	-	10.0
Quebec	129	9.4	9.1	8.3	7.9	8.8	10.0	10.8	12.5	13.1	10.3
Ontario	192	6.4	7.0	9.1	10.0	9.5	10.6	11.2	11.5	14.0	10.9
Manitoba	76	10.2	7.1	7.4	7.9	10.1	8.5	10.0	11.0	12.8	9.3
Saskatchewan	148	8.0	7.2	7.8	8.3	9.6	13.8	11.3	13.1	-	9.5
Alberta	106	7.0	7.2	6.8	7.8	7.9	12.7	9.2	9.8	13.7	8.9
British Columbia	86	-	7.3	7.4	7.8	8.4	8.6	10.5	11.2	13.0	9.3
Yukon	2	-	5.9	-	-	-	-	-	-	-	5.9
Northwest Territories	2	-	6.2	7.9	-	-	-	-	-	-	7.2
CANADA	871	7.7	7.2	7.7	8.7	9.1	10.4	10.9	11.9	13.4	10.2

(1) Patient-days since admission divided by separations.

TABLE A8

HOSPITALS AND OTHER FACILITIES LISTED IN HOSPITAL INSURANCE AGREEMENTS BY STATUS OF HOSPITAL,
CANADA AND PROVINCES, DECEMBER 31st, 1965

PROVINCE	Number of Hospitals ⁽¹⁾				Number of Other Facilities ⁽²⁾	Total
	Budget Review	Contract	Government of Canada	Total		
Newfoundland	43	3	1	47	1	48
Prince Edward Island	9	-	-	9	1	10
Nova Scotia	47	-	1	48	2	50
New Brunswick	38	-	2	40	1	41
Quebec	169	91	11	271	6	277
Ontario	218	86	14	318	4	322
Manitoba	80	6	16	102	2	104
Saskatchewan	153	5	3	161	8	169
Alberta	133	2	8	143	19	162
British Columbia	98	15	6	119	1	120
Yukon	2	-	3	5	1	6
Northwest Territories	2	7	18	27	1	28
CANADA	992	215	83	1,290	47	1,337

(1) Excludes 3 hospitals in the U.S.A. near the Canadian border that are listed in the agreements with New Brunswick and Manitoba.

(2) Comprises: (a) budget review facilities; 3 rehabilitation clinics and 1 university clinic in Quebec; 1 cancer clinic in Manitoba; 1 provincial laboratory, 2 cancer clinics and 2 physical restoration centres in Saskatchewan; and 3 cancer clinics in Alberta; and (b) contract facilities: 1 medical centre in Nova Scotia; 1 medical-arts laboratory in Saskatchewan; 7 laboratories and 7 radiological facilities in Alberta; and 18 Red Cross blood depots in the ten provinces and two territories.

TABLE A9

BEDS IN HOSPITALS LISTED IN HOSPITAL INSURANCE AGREEMENTS BY STATUS OF HOSPITAL,
NUMBER AND PERCENTAGE DISTRIBUTION, CANADA AND PROVINCES, 1965

PROVINCE	Number of Hospitals Reporting	Number			Per cent				
		Budget Review	Contract	Government of Canada	Total	Budget Review	Contract	Government of Canada	Total
Newfoundland	47	2,536	287	44	2,867	88.5	10.0	1.5	100.0
Prince Edward Island	9	629	-	-	629	100.0	-	-	100.0
Nova Scotia	48	4,306	-	443	4,749	90.7	-	9.3	100.0
New Brunswick	40	3,716	-	333	4,049	91.8	-	8.2	100.0
Quebec	268(1)	30,610	3,105	2,147	35,862	85.3	8.7	6.0	100.0
Ontario	314(2)	40,890	2,366	3,485	46,741	87.5	5.1	7.4	100.0
Manitoba	101(3)	6,083	109	812	7,004	86.8	1.6	11.6	100.0
Saskatchewan	158(4)	7,795	23	111	7,929	98.3	.3	1.4	100.0
Alberta	142(5)	11,057	32	984	12,073	91.6	.3	8.1	100.0
British Columbia	119	10,165	109	1,807	12,081	84.1	.9	15.0	100.0
Yukon	5	26	-	134	160	16.2	-	83.8	100.0
Northwest Territories	26(6)	68	211	196	475	14.3	44.4	41.3	100.0
CANADA	1,277	117,881	6,242	10,496	134,619	87.6	4.6	7.8	100.0

(1) 2 contract hospitals and 1 federal hospital did not submit annual reports.

(2) 1 contract hospital and 3 federal hospitals did not submit annual reports.

(3) 1 federal hospital did not submit an annual report.

(4) 1 budget review hospital and 2 contract hospitals did not submit annual reports.

(5) 1 federal hospital did not submit an annual report.

(6) 1 federal hospital did not submit an annual report.

In all, 13 hospitals did not report.

TABLE A10

BUDGET REVIEW GENERAL HOSPITALS BY SIZE OF HOSPITAL,
NUMBER AND PERCENTAGE DISTRIBUTION,
CANADA AND PROVINCES, 1965

PROVINCE	Size of Hospital (Rated Bed Capacity)									Total
	1-9	10-24	25-49	50-99	100-199	200-299	300-499	500-999	1,000 and over	
Number										
Newfoundland	8	14	9	4	4	1	1	1	—	42
Prince Edward Island	—	2	2	1	2	1	—	—	—	8
Nova Scotia	4	10	9	7	8	4	1	1	—	44
New Brunswick	1	7	9	6	7	4	1	1	—	36
Quebec	1	8	14	19	44	18	14	9	2	129
Ontario	4	16	32	45	33	23	25	11	3	192
Manitoba	6	37	15	9	3	3	1	1	1	76
Saskatchewan	22	76	29	8	6	2	3	2	—	148
Alberta	3	23	40	26	5	3	3	2	1	106
British Columbia	—	15	27	20	17	1	3	2	1	86
Yukon	—	2	—	—	—	—	—	—	—	2
Northwest Territories	—	1	1	—	—	—	—	—	—	2
CANADA	49	211	187	145	129	60	52	30	8	871
Per cent										
Newfoundland	19.0	33.3	21.4	9.5	9.5	2.4	2.4	2.4	—	100.0
Prince Edward Island	—	25.0	25.0	12.5	25.0	12.5	—	—	—	100.0
Nova Scotia	9.1	22.7	20.5	15.9	18.2	9.1	2.3	2.3	—	100.0
New Brunswick	2.8	19.4	25.0	16.7	19.4	11.1	2.8	2.8	—	100.0
Quebec	.8	6.2	10.9	14.7	34.1	14.0	10.9	7.0	1.6	100.0
Ontario	2.1	8.3	16.7	23.4	17.2	12.0	13.0	5.7	1.6	100.0
Manitoba	7.9	48.7	19.7	11.8	3.9	3.9	1.3	1.3	1.3	100.0
Saskatchewan	14.9	51.4	19.6	5.4	4.1	1.4	2.0	1.4	—	100.0
Alberta	2.8	21.7	37.7	24.5	4.7	2.8	2.8	1.9	.9	100.0
British Columbia	—	17.4	31.4	23.3	19.8	1.2	3.5	2.3	1.2	100.0
Yukon	—	100.0	—	—	—	—	—	—	—	100.0
Northwest Territories	—	50.0	50.0	—	—	—	—	—	—	100.0
CANADA	5.6	24.2	21.5	16.6	14.8	6.9	6.0	3.4	.9	100.0

TABLE A11

BEDS IN BUDGET REVIEW GENERAL HOSPITALS BY SIZE OF HOSPITAL,
NUMBER AND PERCENTAGE DISTRIBUTION,
CANADA AND PROVINCES, 1965

PROVINCE	Size of Hospital (Rated Bed Capacity)									Total
	1-9	10-24	25-49	50-99	100-199	200-299	300-499	500-999	1,000 and over	
Number of Beds Set up										
Newfoundland	56	289	380	260	541	210	230	538	—	2,504
Prince Edward Island	—	34	63	50	288	164	—	—	—	599
Nova Scotia	47	182	360	536	1,131	819	479	568	—	4,122
New Brunswick	14	114	353	443	831	884	367	536	—	3,542
Quebec	7	167	514	1,347	5,929	4,365	5,225	5,226	2,056	24,836
Ontario	36	308	1,310	3,311	4,657	5,649	9,118	7,573	3,758	35,720
Manitoba	61	713	575	654	389	690	408	656	966	5,112
Saskatchewan	223	1,359	1,071	650	923	495	1,136	1,293	—	7,150
Alberta	42	460	1,350	1,756	708	699	1,048	1,745	1,106	8,914
British Columbia	—	320	1,006	1,493	2,421	243	1,211	1,063	1,594	9,351
Yukon	—	26	—	—	—	—	—	—	—	26
Northwest Territories	—	24	44	—	—	—	—	—	—	68
CANADA	486	3,996	7,026	10,500	17,818	14,218	19,222	19,198	9,480	101,944
Per cent of Beds Set up										
Newfoundland	2.2	11.5	15.2	10.4	21.6	8.4	9.2	21.5	—	100.0
Prince Edward Island	—	5.7	10.5	8.3	48.1	27.4	—	—	—	100.0
Nova Scotia	1.1	4.4	8.7	13.0	27.4	19.9	11.6	13.8	—	100.0
New Brunswick	.4	3.2	10.0	12.5	23.5	25.0	10.4	15.1	—	100.0
Quebec	*	.7	2.1	5.4	23.9	17.6	21.0	21.0	8.3	100.0
Ontario	.1	.9	3.7	9.3	13.0	15.8	25.5	21.2	10.5	100.0
Manitoba	1.2	13.9	11.2	12.8	7.6	13.5	8.0	12.8	18.9	100.0
Saskatchewan	3.1	19.0	15.0	9.1	12.9	6.9	15.9	18.1	—	100.0
Alberta	.5	5.2	15.1	19.7	7.9	7.8	11.8	19.6	12.4	100.0
British Columbia	—	3.4	10.8	16.0	25.9	2.6	13.0	11.4	17.0	100.0
Yukon	—	100.0	—	—	—	—	—	—	—	100.0
Northwest Territories	—	35.3	64.7	—	—	—	—	—	—	100.0
CANADA	0.5	3.9	6.9	10.3	17.5	13.9	18.9	18.8	9.3	100.0

TABLE A12

BEDS IN BUDGET REVIEW HOSPITALS BY TYPE OF UNIT,
NUMBER AND PERCENTAGE DISTRIBUTION,
CANADA AND PROVINCES, 1965

PROVINCE	Acute Treatment					Chronic and Con- valescent	Total
	General	Obste- tric	Paedia- tric	Psychia- tric	Total		
Number							
Newfoundland	1,664	324	443	23	2,454	82	2,536
Prince Edward Island	353	119	106	—	578	51	629
Nova Scotia	2,827	632	703	60	4,222	84	4,306
New Brunswick	2,306	477	700	45	3,528	188	3,716
Quebec	17,623	3,124	4,684	498	25,929	4,681	30,610
Ontario	23,962	4,427	4,945	677	34,011	6,879	40,890
Manitoba	3,440	715	793	168	5,116	967	6,083
Saskatchewan	4,909	869	1,136	173	7,087	708	7,795
Alberta	5,896	1,191	1,393	100	8,580	2,477	11,057
British Columbia	6,484	1,175	1,543	124	9,326	839	10,165
Yukon	15	6	5	—	26	—	26
Northwest Territories	37	11	20	—	68	—	68
CANADA	69,516	13,070	16,471	1,868	100,925	16,956	117,881
Per Cent							
Newfoundland	65.6	12.8	17.5	.9	96.8	3.2	100.0
Prince Edward Island	56.1	18.9	16.9	—	91.9	8.1	100.0
Nova Scotia	65.7	14.7	16.3	1.4	98.0	2.0	100.0
New Brunswick	62.1	12.8	18.8	1.2	94.9	5.1	100.0
Quebec	57.6	10.2	15.3	1.6	84.7	15.3	100.0
Ontario	58.6	10.8	12.1	1.7	83.2	16.8	100.0
Manitoba	56.5	11.8	13.0	2.8	84.1	15.9	100.0
Saskatchewan	63.0	11.1	14.6	2.2	90.9	9.1	100.0
Alberta	53.3	10.8	12.6	.9	77.6	22.4	100.0
British Columbia	63.8	11.6	15.2	1.2	91.7	8.3	100.0
Yukon	57.7	23.1	19.2	—	100.0	—	100.0
Northwest Territories	54.4	16.2	29.4	—	100.0	—	100.0
CANADA	59.0	11.0	14.0	1.6	85.6	14.4	100.0

TABLE A13

BEDS IN CONTRACT HOSPITALS AND IN FEDERAL HOSPITALS BY TYPE OF UNIT,
CANADA AND PROVINCES, 1965

PROVINCE	Number of Hospi- tals Re- porting	Acute Treatment					Chronic and Con- valescent	Total
		General	Obste- tric	Paedia- tric	Psychia- tric	Total		
Contract								
Newfoundland	3	43	5	—	—	48	239	287
Prince Edward Island	—	—	—	—	—	—	—	—
Nova Scotia	—	—	—	—	—	—	—	—
New Brunswick	—	—	—	—	—	—	—	—
Quebec	89	857	208	91	—	1,156	1,949	3,105
Ontario	85	630	74	81	—	785	1,581	2,366
Manitoba	6	69	17	23	—	109	—	109
Saskatchewan	3	6	14	3	—	23	—	23
Alberta	2	19	5	8	—	32	—	32
British Columbia	15	87	5	16	1	109	—	109
Yukon	—	—	—	—	—	—	—	—
Northwest Territories	7	104	19	63	—	186	25	211
CANADA	210	1,815	347	285	1	2,448	3,794	6,242
Government of Canada								
Newfoundland	1	19	10	14	—	43	1	44
Prince Edward Island	—	—	—	—	—	—	—	—
Nova Scotia	1	227	—	—	24	251	192	443
New Brunswick	2	199	—	—	32	231	102	333
Quebec	10	897	8	6	534	1,445	702	2,147
Ontario	11	1,576	20	61	711	2,368	1,117	3,485
Manitoba	15	531	24	34	32	621	191	812
Saskatchewan	3	50	11	50	—	111	—	111
Alberta	7	511	21	115	—	647	337	984
British Columbia	6	926	1	57	44	1,028	779	1,807
Yukon	3	65	24	35	2	126	8	134
Northwest Territories	17	124	23	16	—	163	33	196
CANADA	76	5,125	142	388	1,379	7,034	3,462	10,496

TABLE A14

OCCUPANCY⁽¹⁾ OF HOSPITALS LISTED IN HOSPITAL INSURANCE AGREEMENTS
BY STATUS OF HOSPITAL, CANADA AND PROVINCES, 1965

PROVINCE	Budget Review					Contract	Government of Canada
	General	Chronic	Convales- cent	Other	Total		
Newfoundland	78.0	—	—	96.4	78.3	32.9	14.7
Prince Edward Island	77.1	—	—	77.5	77.1	—	—
Nova Scotia	75.6	—	84.3	63.4	75.3	—	83.8
New Brunswick	81.4	96.2	—	73.5	81.6	—	77.7
Quebec	81.5	93.9	74.0	66.9	82.4	89.6	79.4
Ontario	82.9	91.6	90.2	84.1	83.9	81.8	76.2
Manitoba	78.5	87.3	—	90.3	80.0	56.7	65.5
Saskatchewan	75.9	95.1	—	—	77.5	54.3	80.3
Alberta	74.4	86.2	—	72.8	76.5	79.7	71.6
British Columbia	81.8	96.5	—	69.8	81.4	27.8	86.0
Yukon	30.0	—	—	—	30.0	—	43.0
Northwest Territories	55.5	—	—	—	55.5	26.6	40.2
CANADA	80.5	91.4	82.4	71.6	81.4	80.3	76.3

(1) Patient-days during 1965 as percentage of available bed-days during the year.

TABLE A15
OCCUPANCY OF BUDGET REVIEW HOSPITALS BY SIZE OF HOSPITAL,
CANADA AND PROVINCES, 1965⁽¹⁾

PROVINCE	Number of Hospitals Reporting	Size of Hospital (Rated Bed Capacity)								1,000 and over	Total
		1-9	10-24	25-49	50-99	100-199	200-299	300-499	500-999		
Newfoundland	42	33.5	58.3	64.4	71.9	82.5	93.5	78.8	94.5	—	78.0
Prince Edward Island	8	—	51.4	87.3	50.6	81.9	77.9	—	—	—	77.1
Nova Scotia	44	39.4	63.9	75.7	73.6	74.2	72.7	76.5	90.3	—	75.6
New Brunswick	36	89.1	66.7	77.1	74.9	81.8	81.9	89.4	85.6	—	81.4
Quebec	129	42.8	70.5	74.0	79.4	79.3	77.1	82.8	84.7	90.3	81.5
Ontario	192	43.4	61.5	69.7	78.7	79.5	83.1	83.3	87.6	86.7	82.9
Manitoba	76	63.0	64.0	69.1	76.1	79.5	81.0	84.2	90.5	84.5	78.5
Saskatchewan	148	56.6	68.4	75.6	76.1	76.7	78.2	83.9	78.7	—	75.9
Alberta	106	58.9	56.6	67.0	69.1	74.2	74.0	84.7	84.4	74.6	74.4
British Columbia	86	—	61.6	65.9	78.5	80.0	89.2	87.0	88.7	92.2	81.8
Yukon	2	—	30.0	—	—	—	—	—	—	—	30.0
Northwest Territories	2	—	54.8	55.9	—	—	—	—	—	—	55.5
CANADA	871	53.1	63.8	70.2	76.1	79.0	80.1	83.4	86.3	86.8	80.5

(1) Patient-days during 1965 as percentage of available bed-days during year.

TABLE A16

NEWBORN SERVICES IN HOSPITALS LISTED IN HOSPITAL INSURANCE AGREEMENTS:
BASSINETS, PATIENT-DAYS, SEPARATIONS, AND AVERAGE LENGTH OF STAY,
CANADA AND PROVINCES, 1965

PROVINCE	Hospitals Reporting Bassinets	Bassinets	Patient-Days	Separations	Average Length ⁽¹⁾ of Stay
Newfoundland	44	471	73,589	13,300	5.5
Prince Edward Island	8	136	16,229	2,533	6.4
Nova Scotia	43	858	111,139	16,648	6.7
New Brunswick	35	695	93,230	14,451	6.5
Quebec	161	4,114	764,805	120,154	6.4
Ontario	205	6,070	1,000,581	142,980	7.0
Manitoba	92	1,008	132,328	20,278	6.5
Saskatchewan	152	1,383	133,297	20,530	6.5
Alberta	113	1,686	234,083	32,441	7.2
British Columbia	94	1,519	246,405	33,679	7.3
Yukon	5	44	2,422	425	5.7
Northwest Territories	25	84	5,400	850	6.4
CANADA	977	18,068	2,813,508	418,269	6.7

(1) Patient-days during the year divided by number of separations

TABLE A17
REVENUE FUND EXPENDITURES OF BUDGET REVIEW HOSPITALS,
BY TYPE OF ACCOUNT, CANADA AND PROVINCES, 1965

PROVINCE	Number of Hospitals Reporting	Departmental Expense						Other (Non-departmental) Revenue Fund Expense	Total Revenue Fund Expense	Number of Patient-days
		Salaries	Medical and Surgical Supplies	Drugs	Raw Food	Other Departmental Expense	Total Departmental Expense			
		\$	\$	\$	\$	\$	\$	\$	\$	
Newfoundland	43	10,873,121	699,211	1,116,155	1,725,656	4,706,782	19,120,925	1,440,795	20,561,720	711,374
Prince Edward Island	9	2,475,504	138,321	173,524	300,967	834,912	3,923,228	375,823	4,299,051	176,112
Nova Scotia	47	21,284,373	1,129,651	1,422,095	2,258,363	8,678,466	34,772,948	2,845,919	37,618,867	1,173,437
New Brunswick	38	19,259,999	1,135,387	1,330,400	1,950,731	5,952,150	29,628,667	3,263,241	32,891,908	1,097,305
Quebec	169	228,227,223	10,279,846	13,136,339	15,600,729	48,861,206	316,105,343	22,359,665	338,465,008	9,160,877
Ontario	217	263,174,260	12,443,203	14,866,211	18,787,347	67,637,706	376,908,727	24,506,323	401,415,050	12,490,494
Manitoba	80	32,464,160	1,582,688	2,122,717	2,385,924	7,874,224	46,429,713	2,957,489	49,387,202	1,769,887
Saskatchewan	144	35,427,458	1,668,809	2,091,776	2,834,268	8,959,469	50,981,780	3,843,336	54,825,116	1,977,736
Alberta	133	50,346,606	2,298,103	2,801,919	4,911,002	12,145,297	72,502,927	7,727,679	80,230,606	3,076,497
British Columbia	98	59,884,582	2,807,711	3,172,579	4,187,065	13,694,760	83,746,697	5,117,537	88,864,234	2,908,407
Yukon	2	86,971	5,753	4,089	6,065	19,168	122,046	25,383	147,429	2,850
Northwest Territories	2	227,105	10,362	13,026	26,895	106,846	384,234	32,474	416,708	13,779
CANADA	982	723,731,362	34,199,045	42,250,830	54,975,012	179,470,986	1,034,627,235	74,495,664	1,109,122,899	34,558,755

TABLE A18
REVENUE FUND EXPENDITURES OF BUDGET REVIEW HOSPITALS BY TYPE OF ACCOUNT, CANADA AND PROVINCES, 1965,
(DOLLARS PER PATIENT-DAY)

PROVINCE	Salaries and Wages	Departmental Expense					Other (Non-departmental) Revenue Fund Expense	Total Revenue Fund Expense
		Medical and Surgical Supplies	Drugs	Raw Food	Other Departmental Expense	Total Departmental Expense		
Newfoundland	\$ 15.28	.98	\$ 1.57	\$ 2.43	\$ 6.62	\$ 26.88	\$ 2.03	\$ 28.91
Prince Edward Island	14.06	.79	.99	1.71	4.74	22.28	2.13	24.41
Nova Scotia	18.14	.96	1.21	1.92	7.40	29.63	2.43	32.06
New Brunswick	17.55	1.03	1.21	1.78	5.42	27.00	2.97	29.98
Quebec	24.91	1.12	1.43	1.70	5.33	34.51	2.44	36.95
Ontario	21.07	1.00	1.19	1.50	5.42	30.18	1.96	32.14
Manitoba	18.34	.89	1.20	1.35	4.45	26.23	1.67	27.90
Saskatchewan	17.91	.84	1.06	1.43	4.53	25.78	1.94	27.72
Alberta	16.36	.75	.91	1.60	3.95	23.57	2.51	26.08
British Columbia	20.59	.97	1.09	1.44	4.71	28.79	1.76	30.55
Yukon	30.52	2.02	1.43	2.13	6.73	42.82	8.91	51.73
Northwest Territories	16.48	.75	.95	1.95	7.75	27.89	2.36	30.24
CANADA	20.94	.99	1.22	1.59	5.19	29.94	2.16	32.09

TABLE A19

REVENUE FUND EXPENDITURES OF BUDGET REVIEW HOSPITALS BY TYPE OF ACCOUNT, CANADA AND PROVINCES, 1965
(DOLLARS PER CAPITA)⁽¹⁾

PROVINCE	Departmental Expense						Other (Non-departmental) Revenue Fund Expense	Total Revenue Fund Expense
	Salaries and Wages	Medical and Surgical Supplies	Drugs	Raw Food	Other Departmental Expense	Total Departmental Expense		
	\$	\$	\$	\$	\$	\$	\$	\$
Newfoundland	21.83	1.40	2.24	3.47	9.45	38.40	2.89	41.29
Prince Edward Island	22.92	1.28	1.61	2.79	7.73	36.33	3.48	39.81
Nova Scotia	27.97	1.48	1.87	2.97	11.40	45.69	3.74	49.43
New Brunswick	30.91	1.82	2.14	3.13	9.55	47.56	5.24	52.80
Quebec	40.34	1.82	2.32	2.76	8.64	55.88	3.95	59.83
Ontario	39.10	1.85	2.21	2.79	10.05	56.00	3.64	59.64
Manitoba	33.75	1.65	2.21	2.48	8.19	48.26	3.07	51.34
Saskatchewan	37.25	1.75	2.20	2.98	9.42	53.61	4.04	57.65
Alberta	34.70	1.58	1.93	3.38	8.37	49.97	5.33	55.29
British Columbia	33.47	1.57	1.77	2.34	7.65	46.81	2.86	49.67
Yukon	5.80	.38	.27	.40	1.28	8.14	1.69	9.83
Northwest Territories	9.08	.41	.52	1.08	4.27	15.37	1.30	16.67
CANADA	36.98	1.75	2.16	2.81	9.17	52.87	3.81	56.67

(1) Based on population estimates as on June 1, 1965 by the Dominion Bureau of Statistics.

TABLE A20

REVENUE FUND EXPENDITURES OF BUDGET REVIEW HOSPITALS BY TYPE OF ACCOUNT, CANADA AND PROVINCES, 1965
(PERCENTAGE DISTRIBUTION)

PROVINCE	Departmental Expense						Other (Non-departmental) Revenue Fund Expense	Total Revenue Fund Expense
	Salaries and Wages	Medical and Surgical Supplies	Drugs	Raw Food	Other Departmental Expense	Total Departmental Expense		
Newfoundland	52.9	3.4	5.4	8.4	22.9	93.0	7.0	100.0
Prince Edward Island	57.6	3.2	4.0	7.0	19.4	91.3	8.7	100.0
Nova Scotia	56.6	3.0	3.8	6.0	23.1	92.4	7.6	100.0
New Brunswick	58.6	3.5	4.0	5.9	18.1	90.1	9.9	100.0
Quebec	67.4	3.0	3.9	4.6	14.4	93.4	6.6	100.0
Ontario	65.6	3.1	3.7	4.7	16.8	93.9	6.1	100.0
Manitoba	65.7	3.2	4.3	4.8	15.9	94.0	6.0	100.0
Saskatchewan	64.6	3.0	3.8	5.2	16.3	93.0	7.0	100.0
Alberta	62.8	2.9	3.5	6.1	15.1	90.4	9.6	100.0
British Columbia	67.4	3.2	3.6	4.7	15.4	94.2	5.8	100.0
Yukon	59.0	3.9	2.8	4.1	13.0	82.8	17.2	100.0
Northwest Territories	54.5	2.5	3.1	6.5	25.6	92.2	7.8	100.0
CANADA	65.3	3.1	3.8	5.0	16.2	93.3	6.7	100.0

TABLE A 21

DIAGNOSES OF PATIENTS INSURED BY PROVINCIAL PLANS, (CANADIAN LIST OF 98 DIAGNOSES) CANADA, 1965

Canadian List Number and Diagnosis	I.S.C. No.	Separations		Patient-Days since Admission		Average Length of Stay	Percentage Distribution	
		Total	Rate per 1000 Population	Total	Rate per 1000 Population		Separations	Patient-Days
ALL DIAGNOSES(2)		3,092,668	158.0	36,340,734	1,856.9	11.8	100.0	100.0
I. INFECTIVE AND PARASITIC DISEASES								
1. Tuberculosis, all forms	001-019	42,622	2.2	564,711	28.9	13.2	1.4	1.6
2. Poliomyelitis and encephalitis	080-083	3,438	0.2	72,719	3.7	21.2	0.1	0.2
3. Infectious hepatitis	092	2,286	0.1	77,591	4.0	33.9	0.1	0.2
*4. Other diseases attributable to viruses	084-091,093-096	4,606	0.2	66,181	3.4	14.4	0.1	0.2
*5. Other infective bacterial, spirochetal, rickettsial, or parasitic diseases	020-064,070-074 100-108,110-117 120-138	16,455	0.8	153,429	7.8	9.3	0.5	0.4
		15,837	0.8	194,791	10.0	12.3	0.5	0.5
II. NEOPLASMS								
6. Malignant neoplasm of buccal cavity and pharynx	140-148	172,203	8.8	3,245,766	165.8	18.8	5.6	8.9
7. Malignant neoplasm of stomach	151	2,882	0.1	66,391	3.4	23.0	0.1	0.2
8. Malignant neoplasm of large intestine except rectum		4,888	0.2	144,240	7.4	29.5	0.2	0.4
9. Malignant neoplasm of rectum	153	7,437	0.4	253,444	12.9	34.1	0.2	0.7
10. Malignant neoplasm of bronchus, trachea, & lung, primary & unspecified as to whether primary or secondary	154	4,004	0.2	148,344	7.6	37.0	0.1	0.4
11. Malignant neoplasm of breast	162,163 170	8,047 10,777	0.4 0.6	222,188 287,043	11.4 14.7	27.6 26.6	0.3 0.3	0.6 0.8

TABLE A21 (Cont'd)

Canadian List Number and Diagnosis	I.S.C. No.	Separations		Patient-Days since Admission		Average length of Stay	Percentage Distribution	
		Total	Rate per 1,000 Population	Total	Rate per 1,000 Population		Separations	Patient-Days
II. NEOPLASMS (Cont'd)								
12. Malignant neoplasm of cervix uteri	171	8,936	0.5	140,965	7.2	15.8	0.3	0.4
13. Malignant neoplasm of uterus other than cervix uteri	172-174	3,103	0.2	61,217	3.1	19.7	0.1	0.2
14. Malignant neoplasm of ovary, Fallopian tube and broad ligament	175	2,030	0.1	51,581	2.6	25.4	0.1	0.1
15. Malignant neoplasm of prostate	177	6,625	0.3	204,635	10.5	30.9	0.2	0.6
16. Malignant neoplasm of kidney, bladder, and other urinary organs	180,181	6,908	0.4	156,144	8.0	22.6	0.2	0.4
17. Leukaemia and aleukaemia	204	4,248	0.2	83,392	4.3	19.6	0.1	0.2
*18. Other malignant neoplasms and neoplasms of lymphatic and haematopoietic tissue	150,152,155-161,164,165,176,178,179,190,199,200-203,205 214,215 216	26,035 26,304 8,516	1.3 1.3 0.4	698,660 274,868 91,124	35.7 14.0 4.7	26.8 10.4 10.7	0.8 0.8 0.3	1.9 0.8 0.2
19. Benign neoplasm of uterus								
20. Benign neoplasm of ovary								
*21. Benign neoplasms (excluding uterus and ovary) and neoplasm of unspecified nature	210-213 217-239	41,463	2.1	361,530	18.5	8.7	1.3	1.0
III. ALLERGIC, ENDOCRINE SYSTEM, METABOLIC AND NUTRITIONAL DISEASES								
22. Asthma	241	90,849	4.6	1,426,472	72.9	15.7	2.9	3.9
*23. Other allergic disorders, (excluding asthma)	240,242-245	21,610 7,298	1.1 0.4	235,545 59,546	12.0 3.0	10.9 8.2	0.7 0.2	0.6 0.2

TABLE A21 (Cont'd)

Canadian List Number and Diagnosis	I.S.C. No.	Separations		Patient-Days since Admission		Average Length of Stay	Percentage Distribution	
		Total	Rate per 1,000 Population	Total	Rate per 1,000 Population		Separations	Patient-Days
III. ALLERGIC, ENDOCRINE SYSTEM, METABOLIC AND NUTRITIONAL DISEASES (Cont'd)								
24. Diseases of thyroid gland	250 - 254	11,586	0.6	144,128	7.4	12.4	0.4	0.4
25. Diabetes mellitus	260	38,385	2.0	803,867	41.1	20.9	1.2	2.2
26. Diseases of other endocrine glands	270 - 277	3,356	0.2	48,789	2.5	14.5	0.1	0.1
27. Avitaminoses and other metabolic diseases	280 - 289	8,614	0.4	134,597	6.9	15.6	0.3	0.4
IV. DISEASES OF THE BLOOD AND BLOOD-FORMING ORGANS								
28. Diseases of the blood and blood-forming organs	290 - 299	17,720	0.9	270,212	13.8	15.2	0.6	0.7
V. MENTAL, PSYCHONEUROTIC, AND PERSONALITY DISORDERS								
29. Psychoses	300 - 309	88,692	4.5	1,548,328	79.1	17.5	2.9	4.3
30. Psychoneurotic disorders	310 - 318	20,193	1.0	529,507	27.1	26.2	0.7	1.5
31. Disorders of character, behaviour, and intelligence	320 - 326	51,699	2.6	790,051	40.4	15.3	1.7	2.2
		16,800	0.9	228,770	11.7	13.6	0.5	0.6
VI. DISEASE OF THE NERVOUS SYSTEM AND SENSE ORGANS								
32. Vascular lesions affecting central nervous system	330 - 334	155,121	7.9	3,878,884	198.2	25.0	5.0	10.7
33. Inflammatory and other diseases of central nervous system	340 - 345, 350 - 357	36,075	1.8	1,703,307	87.0	47.2	1.2	4.7
		30,512	1.6	1,378,032	70.4	45.2	1.0	3.8

TABLE A21 (Cont'd)

Canadian List Number and Diagnosis	I.S.C. No.	Separations		Patient-Days since Admission		Average Length of Stay	Percentage Distribution	
		Total	Rate per 1,000 Population	Total	Rate per 1,000 Population		Separations	Patient-Days
VI. DISEASES OF THE NERVOUS SYSTEM AND SENSE ORGANS (Cont'd)								
34. Diseases of nerves and peripheral ganglia	360-369	10,961	0.6	147,012	7.5	13.4	0.4	0.4
35. Diseases and conditions of the eye	370-389	43,199	2.2	381,823	19.5	8.8	1.4	1.0
36. Diseases of ear and mastoid process	390-398	34,374	1.8	268,710	13.7	7.8	1.1	0.7
VII. DISEASES OF THE CIRCULATORY SYSTEM								
37. Rheumatic fever and chronic rheumatic heart disease	400-402,410-416	250,936	12.8	5,186,693	265.0	20.7	8.1	14.3
38. Arteriosclerotic and degenerative heart disease	420-422	11,085	0.6	223,835	11.4	20.2	0.4	0.6
39. Other diseases of the heart	430-434	106,474	5.4	2,612,389	133.5	24.5	3.4	7.2
40. Hypertensive heart disease and other hypertensive disease	440-447	25,564	1.3	493,759	25.2	19.3	0.8	1.4
41. Diseases of arteries	450-456	25,692	1.3	462,498	23.6	18.0	0.8	1.3
42. Varicose veins of lower extremities	460	16,169	0.8	661,007	33.8	40.9	0.5	1.8
43. Haemorrhoids	461	21,751	1.1	272,636	13.9	12.5	0.7	0.8
44. Phlebitis and thrombophlebitis	463,464	20,867	1.1	193,108	9.9	9.3	0.7	0.5
*45. Other diseases of the circulatory system	462,465-468	6,763	0.3	108,727	5.6	16.1	0.2	0.3
		16,571	0.8	158,734	8.1	9.6	0.5	0.4
VIII. DISEASES OF THE RESPIRATORY SYSTEM								
46. Acute upper respiratory infections	470-475	482,284	24.6	3,237,002	165.4	6.7	15.6	8.9
47. Influenza	480-483	53,889	2.8	309,310	15.8	5.7	1.7	0.9
		16,889	0.9	116,198	6.9	6.9	0.5	0.3

TABLE A21 (Cont'd)

Canadian List Number and Diagnosis	I.S.C. No.	Separations		Patient-Days since Admission		Average Length of Stay	Percentage Distribution	
		Total	Rate per 1,000 Population	Total	Rate per 1,000 Population		Separations	Patient-Days
VIII. DISEASES OF THE RESPIRATORY SYSTEM (Cont'd)	490-493	102,119	5.2	1,211,495	61.9	11.9	3.3	3.3
	500-502	62,257	3.2	644,308	32.9	10.3	2.0	1.8
	510	196,741	10.1	429,201	21.9	2.2	6.4	1.2
	511-527	50,389	2.6	526,490	26.9	10.4	1.6	1.4
IX. DISEASES OF THE DIGESTIVE SYSTEM	530-535	420,236	21.5	4,311,558	220.3	10.3	13.6	11.9
	540-542	30,927	1.6	66,275	3.4	2.1	1.0	0.2
		45,995	2.4	672,522	34.4	14.6	1.5	1.8
	543-545	28,667	1.5	233,240	11.9	8.1	0.9	0.6
	550-553	52,013	2.7	403,856	20.6	7.8	1.7	1.1
	560-561	68,723	3.5	633,851	32.4	9.2	2.2	1.7
	570	9,645	0.5	124,414	6.4	12.9	0.3	0.3
	571	52,310	2.7	398,179	20.3	7.6	1.7	1.1
	572	12,438	0.6	206,875	10.6	16.6	0.4	0.6
	580-583	7,336	0.4	149,242	7.6	20.3	0.2	0.4

TABLE A21 (Cont'd)

Canadian List Number and Diagnosis	I.S.C. No.	Separations		Patient-Days Since Admission		Average Length of Stay	Percentage Distribution	
		Total	Rate per 1,000 Population	Total	Rate per 1,000 Population		Separations	Patient-Days
IX. DISEASES OF THE DIGESTIVE SYSTEM (Cont'd)								
61. Diseases of gallbladder and pancreas	584-587	75,508	3.9	1,050,368	53.7	13.9	2.4	2.9
*62. Other diseases of digestive system	536-539, 573-578	36,674	1.9	372,736	19.0	10.2	1.2	1.0
X. DISEASES OF THE GENITO-URINARY SYSTEM								
63. Nephritis and nephrosis	590-594	255,609	13.1	2,442,877	124.8	9.6	8.3	6.7
64. Infections of kidney	600	9,333	0.5	160,724	8.2	17.2	0.3	0.4
65. Calculi of kidney, ureter and other parts of urinary system	602,604	22,501	1.1	256,832	13.1	11.4	0.7	0.7
*66. Other diseases of urinary system	601,603,605-609	19,004	1.0	186,464	9.5	9.8	0.6	0.5
67. Hyperplasia of prostate	610	38,064	1.9	387,088	19.8	10.2	1.2	1.1
68. Redundant prepuce and phimosis	615	18,941	1.0	386,061	19.7	20.4	0.6	1.1
69. Diseases of ovary, Fallopian tube and parametrium, and infective disease of uterus, vagina and vulva	622-626,630	10,389	0.5	35,187	1.8	3.4	0.3	0.1
70. Uterovaginal prolapse	631	35,366	1.8	261,352	13.4	7.4	1.1	0.7
71. Disorders of menstruation	634	21,354	1.1	308,352	15.8	14.4	0.7	0.8
*72. Other diseases of genital organs	611-614,616,617, 620,621,632,633, 635-637	36,716	1.9	172,512	8.8	4.7	1.2	0.5
		43,941	2.2	288,305	14.7	6.6	1.4	0.8
XI. DELIVERIES AND COMPLICATIONS OF PREGNANCY, CHILDBIRTH AND THE PUERPERIUM								
73. Complications of pregnancy	640-649	553,082	28.3	3,182,206	162.6	5.8	17.9	8.8
74. Abortion	650-652	78,438	4.0	343,901	17.6	4.4	2.5	0.9
		49,492	2.5	190,250	9.7	3.8	1.6	0.5

TABLE A21 (Cont'd)

Canadian List Number and Diagnosis	I.S.C. No.	Separations		Patient-Days since Admission		Average Length of Stay	Percentage Distribution	
		Total	Rate per 1,000 Population	Total	Rate Per 1,000 Population		Separations	Patient-Days
XI. DELIVERIES AND COMPLICATIONS OF PREGNANCY, CHILD BIRTH AND THE PUERPERIUM (Cont'd)								
	660	376,562	19.2	2,215,012	113.2	5.9	12.2	6.1
	670-678	40,726	2.1	358,963	18.9	9.1	1.3	1.0
	680-689	7,864	0.4	64,080	3.3	8.1	0.3	0.2
XII. DISEASES OF THE SKIN AND CELLULAR TISSUE								
	690-698	60,532	3.1	603,243	30.8	10.0	2.0	1.7
	700-716	28,444	1.5	229,477	11.7	8.1	0.9	0.6
		32,088	1.6	373,766	19.1	11.6	1.0	1.0
XIII. DISEASES OF BONES AND ORGANS OF MOVEMENT								
	720-727	108,820	5.6	2,059,508	105.2	18.9	3.5	5.7
	735	41,176	2.1	1,015,300	51.9	24.7	1.3	2.8
	730-734,736-738,740-749	20,790	1.1	358,371	18.3	17.2	0.7	1.0
XIV. CONGENITAL MALFORMATIONS								
	750-759	46,854	2.4	685,837	35.0	14.6	1.5	1.9
XV. CERTAIN DISEASES OF EARLY INFANCY								
	760-776	31,715	1.6	465,848	23.8	14.7	1.0	1.3
83. Congenital malformations								
84. Certain diseases of early infancy								
80. Arthritis and rheumatism, except rheumatic fever								
81. Displacement of intervertebral disc								
*82. Other diseases of bones and organs of movement								
80. Arthritis and rheumatism, except rheumatic fever								
81. Displacement of intervertebral disc								
*82. Other diseases of bones and organs of movement								
83. Congenital malformations								
84. Certain diseases of early infancy								

TABLE A21 (Cont'd)

Canadian List Number and Diagnosis	I.S.C. No.	Separations		Patient-Days since Admission		Average Length of Stay	Percentage Distribution	
		Total	Rate per 1,000 Population	Total	Rate per 1,000 Population		Separations	Patient-Days
XVI. SYMPTOMS, SENILITY, AND ILL-DEFINED CONDITIONS *85. Symptoms, senility, and ill-defined conditions	780-795	76,650	3.9	592,355	30.3	7.7	2.5	1.6
XVII. ACCIDENTS, POISONINGS, AND VIOLENCE (NATURE OF INJURY) 86. Fracture of or involving skull or face bones, and head injury, except open wounds, contusion and haematoma of scalp 87. Fracture of spine and trunk 88. Fracture of upper limb 89. Fracture of femur 90. Other fracture of lower limbs (excluding femur) 91. Dislocation without fracture, and sprains and strains of joints and adjacent muscles 92. Internal injury of chest, abdomen, and pelvis 93. Burns *94. Other and unspecified effects of accidents, poisonings, and violence	N800-N804, N852-N856 N805-N809 N810-N819 N820, N821 N822-N829 N830-N848 N860-N869 N940-N949 N850, N851, N870-N888, N890-N898, N900-N908, N910-N918, N920-N936 N950-N999	275,124	14.1	3,184,053	162.7	11.6	8.9	8.8
		42,039	2.1	310,577	15.9	7.4	1.4	0.9
		15,254	0.8	329,001	16.8	21.6	0.5	0.9
		32,699	1.7	204,795	10.5	6.3	1.1	0.6
		16,873	0.9	839,143	42.9	49.7	0.5	2.3
		24,237	1.2	356,095	18.2	14.7	0.8	1.0
		26,040	1.3	225,179	11.5	8.6	0.8	0.6
		4,105	0.2	60,155	3.1	14.7	0.1	0.2
		11,420	0.6	189,729	9.7	16.6	0.4	0.5
		102,457	5.2	669,379	34.2	6.5	3.3	1.8

(1) Prince Edward Island and British Columbia did not include intra-province responsibility of Provincial Plan hospitalization data. Saskatchewan excluded responsibility of Provincial Plan hospitalization data for geriatric hospitals in Regina, Saskatoon, Melfort, and Swift Current. Prince Edward Island, Quebec, Ontario, Manitoba and Alberta included data for hospitalization not the responsibility of Provincial Plan.

(2) Excludes "Y" group supplementary classification for special admissions: live births and stillbirths (95-98).

(3) These figures are estimated to offset a coding variation that occurred in Ontario.

*Residual or extremely heterogeneous, and hence excluded in the determination of the ranking in Table 10

TABLE A 22

FULL-TIME AND PART-TIME PERSONNEL IN HOSPITALS LISTED IN HOSPITAL INSURANCE AGREEMENTS, BY CATEGORY OF EMPLOYMENT
CANADA AND PROVINCES, 1965

Category	Newfoundland		Prince Edward Island		Nova Scotia		New Brunswick		Quebec		Ontario		Manitoba	
	F.T.	P.T.	F.T.	P.T.	F.T.	P.T.	F.T.	P.T.	F.T.	P.T.	F.T.	P.T.	F.T.	P.T.
EMPLOYEES (except trainees)														
A. Medical	45	72		4	4			42	116	679	1,012	536	796	65
B. Nursing														
1. Graduate nurses	838	55	222	18	1,934	366	1,577	284	12,027	1,661	17,774	5,138	2,048	702
2. Qualified nursing assistants	337	2	98	3	641	90	738	36	4,586	236	6,588	852	868	190
3. Orderlies	139	—	26	1	170	—	305	12	3,290	136	3,008	180	515	9
4. Other	404	7	43	3	490	44	719	104	9,241	725	9,055	1,474	1,825	243
Total	1,718	64	389	25	3,235	500	3,339	436	29,144	2,758	36,425	7,644	5,256	1,149
C. Other professional and technical														
1. Hospital administrators	34	21	10	2	53	1	43	6	202	27	340	23	91	16
2. Dietitians	8	—	2	3	38	8	34	6	257	28	340	50	45	10
3. Medical record librarians	17	—	4	1	67	2	39	1	241	30	294	34	56	20
4. Laboratory technicians	99	2	9	2	171	13	43	3	1,602	192	1,888	217	228	28
5. Radiological technicians	53	—	11	1	163	4	84	6	836	50	903	80	85	15
6. Combined laboratory and radiological technicians	26	—	5	—	7	1	—	—	314	33	39	2	17	8
7. Physiotherapists	16	3	13	1	39	3	27	2	242	52	474	105	54	7
8. Occupational therapists	3	—	3	1	10	—	6	—	59	10	131	17	31	7
9. Pharmacists	17	—	3	—	28	3	27	5	223	80	275	70	46	10
10. Psychologists	—	—	—	—	2	2	1	2	48	33	34	16	2	3
11. Social workers	2	—	—	—	14	1	11	2	172	45	110	22	31	3
Total	275	26	60	11	592	38	315	33	4,286	580	4,828	636	686	127
D. Other personnel	1,682	4	359	45	3,075	170	2,676	79	25,138	1,615	27,653	4,338	3,673	586
TOTAL EMPLOYEES (except trainees)	3,720	166	812	85	6,959	828	6,372	664	59,247	5,965	69,442	13,414	9,680	2,069
TRAINEES														
A. Medical	15	2	—	—	94	—	84	2	1,699	52	785	4	135	15
1. Residents and senior interns	22	—	1	—	57	2	9	—	596	54	288	6	59	8
2. Junior interns	37	2	1	—	151	2	93	2	2,295	106	1,073	10	194	23
Total	604	—	204	—	1,156	—	1,101	—	6,776	—	8,045	—	1,129	—
B. Nursing	259	—	9	—	107	—	65	—	2,512	—	799	—	194	—
1. Student nurses	863	—	213	—	1,263	—	1,166	—	9,288	—	8,844	—	1,323	—
2. Nursing assistants	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Total	—	—	—	—	11	—	—	—	27	—	15	—	6	—
C. Other professional and technical	7	—	—	—	46	—	3	—	97	—	504	—	119	—
1. Medical record librarians	10	—	6	—	37	—	39	—	304	—	470	—	73	—
2. Laboratory technicians	17	—	6	—	94	—	42	—	428	—	989	—	198	—
3. Radiological technicians	917	2	220	—	1,508	2	1,301	2	12,011	106	10,906	10	1,715	23
Total	4,637	168	1,032	85	8,467	830	7,673	666	71,258	6,071	80,348	13,424	11,395	2,092
TOTAL TRAINEES														
TOTAL PERSONNEL														

TABLE 22 (Cont'd)

Category	Saskatchewan		Alberta		British Columbia		Yukon		Northwest Territories		Canada	
	F.T.	P.T.	F.T.	P.T.	F.T.	P.T.	F.T.	P.T.	F.T.	P.T.	F.T.	P.T.
EMPLOYEES (Except Trainees)												
A. Medical	54	40		87	114	263	-	-	-	-	1,650	2,717
B. Nursing												
1. Graduate nurses	2,452	540	3,623	579	4,551	506	49	2	95	12	47,190	9,863
2. Qualified nursing assistants	770	59	1,946	106	1,209	79	22	-	43	2	17,846	1,655
3. Orderlies	306	2	571	28	848	21	2	-	1	-	9,201	389
4. Other	1,199	172	1,907	151	1,467	212	-	-	16	8	26,366	3,148
Total	4,747	773	8,047	864	8,075	818	73	2	155	22	100,603	15,055
C. Other professional and technical												
1. Hospital administrators	157	15	154	9	119	10	2	-	8	5	1,303	135
2. Dietitians	28	3	74	12	86	17	-	-	1	-	913	137
3. Medical record librarians	51	12	97	19	73	7	3	-	3	-	945	126
4. Laboratory technicians	285	16	400 ¹	35 ¹	425	33	3	-	5	1	5,158	542
5. Radiological technicians	120	4	133	7	186	23	2	-	1	1	2,577	191
6. Combined Laboratory radiological technicians												
7. Physiotherapists	88	16	102	11	10	4	-	-	2	-	610	75
8. Occupational therapists	34	4	113	8	124	17	-	-	-	1	1,136	203
9. Pharmacists	11	-	30	10	27	1	-	-	-	-	311	46
10. Psychologists	47	15	48	19	55	18	1	-	1	-	771	220
11. Social workers	4	-	6	5	2	1	-	-	-	-	99	62
Total	24	3	18	5	46	5	-	-	-	-	428	86
Total	849	88	1,175	140	1,153	136	11	-	21	8	14,251	1,823
D. Other personnel	3,975	390	5,219	607	6,102	951	68	3	160	29	79,780	8,817
TOTAL EMPLOYEES (except trainees)	9,625	1,291	14,495	1,698	15,444	2,168	152	5	336	59	196,284	28,412
TRAINEES												
A. Medical												
1. Residents and senior interns	83	-	143	1	199	1	-	-	-	-	3,237	77
2. Junior interns	46	-	56	-	77	6	-	-	-	-	1,211	76
Total	129	-	199	1	276	7	-	-	-	-	4,448	153
B. Nursing												
1. Student nurses	1,271	-	1,818	-	1,469	-	-	-	-	-	23,573	-
2. Nursing assistants	116	-	168	-	183	-	-	-	1	-	4,413	-
Total	1,387	-	1,986	-	1,652	-	-	-	1	-	27,986	-
C. Other professional and technical												
1. Medical record librarians	5	-	11	-	5	-	-	-	-	-	80	-
2. Laboratory technicians	145	-	117	-	83	-	-	-	-	-	1,121	-
3. Radiological technicians	61	-	95	-	77	-	-	-	-	-	1,172	-
Total	211	-	223	-	165	-	-	-	-	-	2,373	-
TOTAL TRAINEES	1,727	-	2,408	1	2,093	7	-	-	1	-	34,807	153
TOTAL PERSONNEL	11,352	1,291	16,903	1,699	17,537	2,175	152	5	337	59	231,091	28,565

⁽¹⁾ Includes 135 full-time and 15 part-time technicians employed by the Provincial Laboratories of Public Health (Edmonton and Calgary).

TABLE A23
PERSONNEL IN HOSPITALS LISTED IN HOSPITAL INSURANCE AGREEMENTS, PERCENTAGE DISTRIBUTION BY CATEGORY OF EMPLOYMENT, CANADA AND PROVINCES, 1965

Category	Nfld.	P.E.I.	N.S.	N.B.	Que.	Ont.	Man.	Sask.	Alta.	B.C.	Yukon	N.W.T.	Canada
EMPLOYEES (except trainees)													
A. Medical	2.4	.7	1.9	1.9	2.2	1.4	2.0	.7	.8	1.9	—	—	1.7
B. Nursing													
1. Graduate nurses	18.6	21.5	24.7	22.3	17.7	24.4	20.4	23.7	22.6	25.7	32.5	27.0	22.0
2. Qualified nursing assistants	7.1	9.0	7.9	9.3	6.2	7.9	7.8	6.6	11.0	6.5	14.0	11.4	7.5
3. Orderlies	2.9	2.4	1.8	3.4	3.4	3.4	3.9	2.6	3.2	4.4	1.3	6.3	3.7
4. Other	8.6	4.1	5.7	9.9	12.9	11.2	15.4	10.8	11.1	8.5	—	6.1	11.4
Total	37.1	37.1	40.2	45.3	41.3	47.0	47.5	43.7	47.9	45.1	47.8	44.7	44.5
C. Other professional and technical													
1. Hospital administrators	1.1	1.1	.6	.6	.4	.4	.8	1.4	.9	.7	1.3	3.3	.6
2. Dietitians	.2	.4	.5	.5	.4	.4	.4	.2	.5	.5	—	.3	.4
3. Medical record librarians	.4	.4	.7	.5	.4	.3	.6	.5	.6	.4	1.9	.8	.4
4. Laboratory technicians	2.1	1.0	2.0	.6	2.3	2.2	1.9	2.4	2.3	2.3	1.9	1.5	2.2
5. Radiological technicians	1.1	1.1	1.8	1.1	1.1	1.0	.7	1.0	.8	1.1	1.3	.5	1.1
6. Combined laboratory and radiological technicians	.5	.4	.1	—	.4	*	.2	.8	.6	.1	—	.5	.3
7. Physiotherapists	.4	1.3	.5	.3	.4	.6	.5	.3	.7	.7	—	.3	.5
8. Occupational therapists	.1	.4	.1	.1	.1	.2	.3	.1	.2	.1	—	—	.1
9. Pharmacists	.4	.3	.3	.4	.4	.4	.4	.5	.4	.4	.6	.3	.4
10. Psychologists	—	—	*	*	.1	.1	*	*	.1	*	—	—	.1
11. Social workers	*	—	.2	.2	.3	.1	.3	.2	.1	.3	—	—	.2
Total	6.3	6.4	6.8	4.2	6.3	5.8	6.0	7.4	7.1	6.5	7.0	7.3	6.2
D. Other personnel	35.1	36.2	34.9	33.0	34.6	34.1	31.6	34.5	31.3	35.8	45.2	47.7	34.1
TOTAL EMPLOYEES (except trainees)	80.9	80.3	83.8	84.4	84.3	88.4	87.1	86.3	87.0	89.3	100.0	99.7	86.5
TRAINEES													
A. Medical	.4	—	1.0	1.0	2.3	.8	1.1	.7	.8	1.0	—	—	1.3
1. Residents and senior interns	.5	.1	.6	.1	.8	.3	.5	.4	.3	.4	—	—	.5
2. Junior interns													
Total	.8	.1	1.6	1.1	3.1	1.2	1.6	1.0	1.1	1.4	—	—	1.8
B. Nursing	12.6	18.3	12.4	13.2	8.8	8.6	8.4	10.1	9.8	7.5	—	—	9.1
1. Student nurses	5.4	.8	1.2	.8	3.2	.9	1.4	.9	.9	.9	—	.3	1.7
2. Nursing assistants													
Total	18.0	19.1	13.6	14.0	12.0	9.4	9.8	11.0	10.7	8.4	—	.3	10.8
C. Other professional and technical													
1. Medical record librarians	—	—	.1	—	*	*	*	*	.1	*	—	—	*
2. Laboratory technicians	.1	—	.5	*	.1	.5	.9	1.1	.6	.4	—	—	.4
3. Radiological technicians	.2	.5	.4	.5	.4	.5	.5	.5	.5	.4	—	—	.5
Total	.4	.5	1.0	.5	.6	1.1	1.5	1.7	1.2	.8	—	—	.9
TOTAL TRAINEES	19.1	19.7	16.2	15.6	15.7	11.6	12.9	13.7	13.0	10.7	—	.3	13.5
TOTAL PERSONNEL	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0

* Less than 0.05

(¹) Part-time employees counted as full-time
Source: Table A 22

TABLE A24

PERSONNEL ⁽¹⁾ IN HOSPITALS LISTED IN HOSPITAL INSURANCE AGREEMENTS BY CATEGORY OF EMPLOYMENT,
RATES PER 100,000 POPULATION, CANADA AND PROVINCES, 1965

Category	Nfld.	P.E.I.	N.S.	N.B.	Que.	Ont.	Man.	Sask.	Alta.	B.C.	Yukon	N.W.T.	Canada
EMPLOYEES (Except Trainees)													
A. Medical	16.3	5.6	15.4	16.1	20.9	13.9	17.5	7.8	6.7	13.7	—	—	15.4
B. Nursing	173.8	213.9	278.2	275.9	227.3	302.2	249.4	286.2	269.6	268.5	333.3	404.0	266.3
1. Graduate nurses	67.9	92.1	90.1	121.3	83.2	104.2	100.1	84.1	137.8	69.8	146.7	176.0	95.4
2. Qualified nursing assistants	27.9	24.5	22.3	49.9	59.4	46.0	54.0	34.4	40.3	48.0	13.3	4.0	48.0
3. Orderlies	81.8	41.2	67.3	123.8	169.8	145.5	202.6	135.1	136.6	87.9	—	80.0	142.8
4. Other													
Total	351.4	371.7	458.0	570.9	539.6	597.9	606.1	539.8	584.4	474.2	493.3	664.0	552.5
C. Other professional and technical													
1. Hospital administrators	8.9	10.2	7.0	7.4	5.4	5.2	10.3	17.3	10.9	6.9	13.3	42.0	7.0
2. Dietitians	1.6	3.2	5.5	5.9	4.8	5.4	5.2	3.1	5.5	3.3	—	4.0	5.0
3. Medical record librarians	3.4	4.2	8.9	6.3	4.5	4.6	6.9	6.0	7.3	4.3	20.0	12.0	5.2
4. Laboratory technicians	20.1	9.3	23.3	7.1	30.0	29.7	25.2	30.8	28.8	24.7	20.0	22.0	27.7
5. Radiological technicians	10.6	10.6	21.7	14.0	15.2	14.0	9.6	12.8	9.4	11.0	13.3	6.0	13.7
6. Combined laboratory and radiological technicians	5.2	4.6	1.0	—	5.8	.6	2.2	10.1	7.4	.7	—	8.0	3.3
7. Physiotherapists	3.5	12.5	5.3	4.5	4.7	7.8	6.0	3.8	8.1	7.4	—	2.0	6.3
8. Occupational therapists	.6	3.2	1.3	1.0	1.1	2.1	3.6	1.2	2.4	1.7	—	—	1.7
9. Pharmacists	3.4	2.8	3.9	4.7	4.6	4.6	5.3	5.7	4.0	3.6	6.7	4.0	4.5
10. Psychologists	—	—	.4	.3	1.1	.6	.4	.4	.6	.1	—	—	.7
11. Social workers	.4	—	1.9	1.9	3.4	1.8	3.4	2.7	1.4	2.7	—	—	2.4
Total	57.8	60.6	80.3	53.2	80.9	76.4	77.9	93.9	85.8	68.3	73.3	100.0	77.5
D. Other personnel	338.2	353.2	415.2	435.9	458.6	443.1	412.3	438.5	380.6	367.7	463.3	698.0	430.2
TOTAL EMPLOYEES (except trainees)	763.7	791.2	968.9	1,076.1	1,100.0	1,131.3	1,113.8	1,080.0	1,057.5	923.9	1,030.0	1,462.0	1,075.5
TRAINEES													
A. Medical													
1. Residents and senior interns	3.2	—	12.4	13.6	30.5	11.7	14.8	8.7	9.9	11.1	—	—	16.7
2. Junior interns	4.4	.9	7.6	1.4	11.0	4.3	6.5	4.8	3.8	4.5	—	—	6.3
Total	7.6	.9	20.0	15.1	41.5	16.0	21.4	13.6	13.7	15.6	—	—	23.1
B. Nursing	121.3	188.9	151.9	176.7	119.8	119.5	117.4	133.6	125.3	82.1	—	—	120.4
1. Student nurses	52.0	8.3	14.1	10.4	44.4	11.9	20.2	12.2	11.6	10.2	—	4.0	22.5
2. Nursing assistants	73.3	197.2	166.0	187.2	164.2	131.4	137.5	145.8	136.9	92.3	—	4.0	143.0
Total	—	—	1.4	—	.5	.2	.6	.5	.8	.3	—	—	.4
C. Other professional and technical	1.4	—	6.0	.5	1.7	7.5	12.4	15.2	8.1	4.6	—	—	5.7
1. Medical record librarians	2.0	5.6	4.9	6.3	5.4	7.0	7.6	6.4	6.5	4.3	—	—	6.0
2. Laboratory technicians													
3. Radiological technicians													
Total	3.4	5.6	12.4	6.7	7.6	14.7	20.6	22.2	15.4	9.2	—	—	12.1
TOTAL TRAINEES	184.3	203.7	198.3	209.0	213.3	162.1	179.5	181.6	166.0	117.2	—	4.0	178.2
TOTAL PERSONNEL	948.0	994.9	1,167.1	1,285.1	1,313.3	1,293.4	1,293.2	1,261.6	1,223.5	1,041.1	1,030.0	1,466.0	1,253.8

(1) Two part-time employees counted as one full-time.

Source: Table A22.

TABLE A25

PAID HOURS OF WORK OF NURSING AND OTHER PERSONNEL, PATIENT-DAYS AND RATIOS OF HOURS TO PATIENT-DAYS IN BUDGET REVIEW HOSPITALS, CANADA AND PROVINCES, 1965

PROVINCE	Number			Hours per Patient-Day			Patient Days During Year
	Total	Nursing Personnel	Other Personnel	Total	Nursing Personnel	Other Personnel	
Newfoundland	7,843,411	4,537,322	3,306,089	13.60	7.87	5.73	576,665
Prince Edward Island	2,089,113	1,184,070	905,043	12.46	7.06	5.40	167,630
Nova Scotia	15,991,850	8,877,613	7,114,237	14.19	7.88	6.31	1,126,830
New Brunswick	14,673,482	8,665,958	6,007,524	14.06	8.30	5.76	1,043,576
Quebec	118,223,468	61,972,463	56,251,005	16.07	8.42	7.65	7,355,215
Ontario	148,375,672	83,632,889	64,742,783	13.75	7.75	6.00	10,789,461
Manitoba	20,054,496	11,419,226	8,635,270	13.75	7.82	5.92	1,458,795
Saskatchewan	23,919,772	13,249,219	10,670,553	12.09	6.69	5.39	1,978,762
Alberta	30,316,072	17,574,094	12,741,978	12.53	7.26	5.27	2,419,383
British Columbia	33,174,426	18,819,123	14,355,303	11.90	6.75	5.15	2,787,493
Yukon	25,987	10,304	15,683	14.23	5.64	8.59	1,826
Northwest Territories	130,899	57,587	73,312	9.50	4.18	5.32	13,779
CANADA	414,818,648	229,999,868	184,818,780	13.96	7.74	6.22	29,719,415



Annual Report

of the

Minister of National Health and Welfare

on the operation of

Agreements with the Provinces

under the

Hospital Insurance

and

Diagnostic Services Act

for the fiscal year ended March 31, 1968

ANNUAL REPORT

OF THE

MINISTER OF NATIONAL HEALTH AND WELFARE

ON THE OPERATION OF

AGREEMENTS WITH THE PROVINCES

UNDER THE

HOSPITAL INSURANCE AND DIAGNOSTIC SERVICES ACT

FOR THE FISCAL YEAR ENDED

MARCH 31, 1968

INDEX OF TABLES

	<u>Page</u>
TABLE A - Number of Insured Persons, by Province, on March 31, 1968.....	11
TABLE B - Net Population of Canada as Estimated by Dominion Statistician, by Province and Percentage Increase over Previous Year, 1958 to 1967.....	12
TABLE C - Summary of Payments made by Canada, by Province, 1967-68 Fiscal year.....	14
TABLE D - Payments by Canada - in each Fiscal Year, by Province, July 1, 1958 to March 31, 1968.....	15
TABLE E - Payments by Canada - in respect of each Calendar Year, by Province, July 1, 1958 to March 31, 1968	18
TABLE F - Cost of In-Patient Services, 1965; Net Population, June 1, 1965; Total and 25% Per Capita Cost, 1965, by Province	19
TABLE G - Contribution by Canada with respect to In-Patient Services, 1965	20
TABLE H - Contribution by Canada with respect to Out-Patient Services, 1965	21
TABLE J - Total Contributions and Final Payments made by Canada, by Province, with respect to 1965.....	22
TABLE K - Cost of In-Patient Services, by Province, 1965.....	23
TABLE L - Per Capita Cost of In-Patient Services, and Percentage Increase over Previous Year, by Province, 1958 to 1965	27
TABLE M - Final Cost of In-Patient Services and Percentage Increase over Previous Year, by Province, 1958 to 1965	28

INDEX OF TABLES (Cont'd)

		<u>Page</u>
TABLE 1	- Number of Hospitals and other facilities listed in Hospital Insurance Agreements and reporting, Canada, 1961 - 1966	35
TABLE 2	- Insured Patient-Days excluding Newborn in Hospitals listed in Hospital Insurance Agreements, Canada and Provinces, 1961 - 1966	36
TABLE 3	- Insured Population, Canada and Provinces, 1961 - 1966	37
TABLE 4	- Insured Patient-Days excluding Newborn in Hospitals listed in Hospital Insurance Agreements, rate per 1,000 insured population and index numbers, Canada and Provinces, 1961 - 1966	38
TABLE 5	- Patient-Days excluding Newborn in Hospitals listed in Hospital Insurance Agreements, number and rates per 1,000 population, and number and percentage of patient-days by responsibility for payment, Canada, 1961 - 1966.....	40
TABLE 6	- Patient-Days excluding Newborn in Hospitals listed in Hospital Insurance Agreements, by status of Hospital and type of accommodation, and percentage distribution by type of accommodation, Canada, 1961 - 1966.....	41
TABLE 7	- Admissions to Hospitals listed in Hospital Insurance Agreements, number and rates per 1,000 population, Canada and Provinces, 1961 - 1966	43
TABLE 8	- Average Length of Stay excluding Newborn in Hospitals listed in Hospital Insurance Agreements, by status and type of Hospital, Canada, 1961 - 1966	44
TABLE 9	- Average Length of Stay excluding Newborn in Budget Review General Hospitals, Canada and Provinces, 1961 - 1966	45

INDEX OF TABLES (Cont'd)

	<u>Page</u>
TABLE 10 - Separations and Patient-Days excluding Newborn since admission by Length of Stay, number and percentage distribution for Patients insured under Provincial Plans, Canada, 1966	47
TABLE 11 - Beds in Hospitals listed in Hospital Insurance Agreements, number and ratio per 1,000 population, Canada and Provinces, 1961 - 1966 ...	48
TABLE 12 - Budget Review General Hospitals by size of Hospital and number and percentage distribution of beds, Canada, 1961 - 1966	49
TABLE 13 - Beds in Hospitals listed in Hospital Insurance Agreements by status of hospital and number and percentage distribution by type of unit, Canada, 1966	50
TABLE 14 - Occupancy in Hospitals listed in Hospital Insurance Agreements by status and type of Hospital, Canada, 1961 - 1966	54
TABLE 15 - Occupancy in Budget Review General Hospitals, Canada and Provinces, 1961 - 1966	56
TABLE 16 - Newborn in Hospitals listed in Hospital Insurance Agreements: Hospitals, Bassinets, Patient-Days, Separations, and Length of Stay, Canada, 1961 - 1966	57
TABLE 17 - Revenue Fund Expenditures of Budget Review Hospitals, Canada and Provinces, 1961 - 1966	59
TABLE 18 - Revenue Fund Expenditure of Budget Review Hospitals per Patient-Day, excluding Newborn, Canada and Provinces, 1961 - 1966	61
TABLE 19 - Revenue Fund Expenditures of Budget Review Hospitals per capita, Canada and Provinces, 1961 - 1966	62

INDEX OF TABLES (Cont'd)

	<u>Page</u>
TABLE 20 - Separations and Days of Care since Admission per 1,000 population, and average length of stay, by age, for Patients insured by Provincial Plans, Canada, 1961 - 1966	64
TABLE 21 - Separations and Days of Care since Admission, number and rates per 1,000 population and average length of stay for Patients insured by Provincial Plans, and population of Canada by sex and age, Canada, 1966	65
TABLE 22 - Ten Leading Diagnostic Categories (Canadian list of 98 diagnoses) among Separations of Patients (excluding newborn) insured by Provincial Plans, number, rank and percentage distribution, Canada, 1963 - 1966	67
TABLE 23 - Personnel in listed Hospitals, full-time and part-time, Canada and Provinces, 1961 - 1966	69
TABLE 24 - Personnel in listed Hospitals, full-time and part-time by profession, Canada, 1966	71
TABLE 25 - Hours of Work in Budget Review General Hospitals, Total and per Patient-Day for Nursing and other personnel, Canada, 1961 - 1966.....	72

INDEX OF APPENDIX TABLES

	<u>Page</u>
TABLE A1 - Status of Hospitals and other facilities listed in Hospital Insurance Agreements, Canada and Provinces, December 31st, 1966	73
TABLE A2 - Patient-Days excluding Newborn in Hospitals listed in Hospital Insurance Agreements by responsibility for payment, Canada and Provinces, 1966	74
TABLE A3 - Percentage Distribution of Patient-Days excluding Newborn in Hospitals listed in Hospital Insurance Agreements by responsibility for payment, Canada and Provinces, 1966	75
TABLE A4 - Patient-Days excluding Newborn in Hospitals listed in Hospital Insurance Agreements by status of Hospital, number and population rates by Province, and percentage distribution by status of Hospital, Canada and Provinces, 1966	76
TABLE A5 - Patient-Days excluding Newborn in Budget Review Hospitals, number and percentage distribution by type of accommodation, Canada and Provinces, 1966	77
TABLE A6 - Separations excluding Newborn in Hospitals listed in Hospital Insurance Agreements, number and rates per 1,000 population, Canada and Provinces, 1961 - 1966	78
TABLE A7 - Average Length of Stay excluding Newborn in Hospitals listed in Hospital Insurance Agreements by status and types of Hospital, Canada and Provinces, 1966	79
TABLE A8 - Percentage Distribution of Patient-Days since Admission by Length of Stay, Canada and Provinces, 1966	81
TABLE A9 - Budget Review General Hospitals and average number of days of care since admission for separations by size of Hospital, Canada and Provinces, 1966	82

INDEX OF APPENDIX TABLES (Cont'd)

	<u>Page</u>
TABLE A10 - Beds in Hospitals listed in Hospital Insurance Agreements by status of Hospital, number and percentage distribution, Canada and Provinces, 1966.....	83
TABLE A11 - Budget Review General Hospitals by size of Hospital, Canada and Provinces, 1966	84
TABLE A12 - Beds in Budget Review General Hospitals by size of Hospital, number and percentage distribution, Canada and Provinces, 1966	85
TABLE A13 - Beds in Budget Review Hospitals by type of unit, number and percentage distribution, Canada and Provinces, 1966	86
TABLE A14 - Beds in Contract Hospitals and in Federal Hospitals by type of unit, Canada and Provinces, 1966	87
TABLE A15 - Occupancy of Hospitals listed in Hospital Insurance Agreements by status of Hospital, Canada and Provinces, 1966	88
TABLE A16 - Occupancy of Budget Review General Hospitals by size of Hospital, Canada and Provinces, 1966.....	89
TABLE A17 - Newborn Services in Hospitals listed in Hospital Insurance Agreements: Bassinets, Patient-Days, Separations, and Average Length of Stay, Canada and Provinces, 1966	90
TABLE A18 - Revenue Fund Expenditures of Budget Review Hospitals, by type of account, Canada and Provinces, 1966	91
TABLE A19 - Revenue Fund Expenditures of Budget Review Hospitals by type of account, Canada and Provinces, 1966 (dollars per patient-day)	92
TABLE A20 - Revenue Fund Expenditures of Budget Review Hospitals by type of account, Canada and Provinces, 1966 (dollars per capita)	93

INDEX OF APPENDIX TABLES (Cont'd)

	<u>Page</u>
TABLE A21 - Revenue Fund Expenditures of Budget Review Hospitals by type of account, Canada and Provinces, 1966 (percentage distribution)	94
TABLE A22 - Diagnoses (Canadian list of 98 diagnoses) of Patients, excluding newborn whose care was provided by Provincial Plans, Canada, 1966	95
TABLE A23 - Full-time and part-time personnel in Hospitals listed in Hospital Insurance Agreements, by category of employment, Canada and Provinces, 1966.....	103
TABLE A24 - Personnel in Hospitals listed in Hospital Insurance Agreements, percentage distribution by category of employment, Canada and Provinces, 1966	105
TABLE A25 - Personnel in Hospitals listed in Hospital Insurance Agreements by category of employment, rates per 100,000 population, Canada and Provinces, 1966	106
TABLE A26 - Paid Hours of Work of Nursing and other personnel, Patient-Days and ratios of hours to Patient-Days in Budget Review General Hospitals, Canada and Provinces, 1966	107

ANNUAL REPORT
of the
MINISTER OF NATIONAL HEALTH AND WELFARE
on the operation of
Agreements with the Provinces
under the
Hospital Insurance and Diagnostic Services Act
for the fiscal year ended March 31, 1968

This is the tenth report of Parliament required to be made in accordance with Section 9 of the Hospital Insurance and Diagnostic Services Act and it is made with respect to the operation of the Agreements under the Act for the fiscal year ended March 31, 1968.

It should be noted that the data concerning federal financial contributions, other than the final contribution for 1965, and the number of insured persons as set out in Part I of this report, relate to the fiscal year ended March 31, 1968. The hospital utilization and financial data generally are based on the calendar year and, for this reason, such statistical data concerning the operation of hospitals relate to the calendar year 1966 and are set out in Part II of this report.

Part I of this report also describes the amendments made during the year under review to the federal-provincial Agreements under the Hospital Insurance and Diagnostic Services Act. These amendments have been made in accordance with changes in provincial laws or in provincial administrative arrangements as set out in the Schedules of the Agreements. The activities of the Advisory Committee on Hospital Insurance and Diagnostic Services and of the Directorate are outlined. As in previous years, a description is given of the provisions of provincial programmes as in force at the end of the year under review. Figures are provided concerning the number of persons covered by the hospital insurance programs at the end of the year under review and the increases in population since the inception of the program are shown. An outline of the statutory basis for federal contributions and advance payments made to the provinces is also included. The amounts of payments made to the provinces during the fiscal year under review are shown, and some comparative data are given with regard to final costs since the inception of the program.

Part II of this report contains statistical data derived from the Annual Return of Hospitals for 1966. As explained in previous reports, the Annual Return of Hospitals was designed for a dual purpose: to fulfill the requirements of the Statistics Act in relation to hospital statistics and administered by the Dominion Bureau of Statistics, and to implement the provincial undertakings embodied in the Agreements under the Hospital Insurance and Diagnostic Services Act and administered by the Department of National Health and Welfare.

PART I - Relating to Fiscal Year 1967-1968

1. Operation of Agreements with the Provinces

(a) Changes in Legislation and Agreements

Three provinces extended their out-patient coverage during 1967. Prince Edward Island has widened the range of its radiological examinations. Quebec has added all laboratory and radiological examinations and will also cover any other diagnostic test or procedure upon medical prescription. Ontario now covers the full range of radiotherapy services.

For the first time, the Federal Government has agreed to share in the operating cost of a hospital for the treatment of alcoholism and drug addiction. This was the Donwood Foundation, Toronto.

(b) Summary of Provincial Programs

Because of the variation in programs provided by the provinces in accordance with agreements under the Hospital Insurance and Diagnostic Services Act, it has been the practice to include in this report a summary of provincial programs as at the end of the fiscal year under review.

(1) In-Patient Services

Since it is a primary requisite for entering into an agreement under the federal Act that a province provide, on uniform terms and conditions, the in-patient services specified in the federal law, all of the provinces provide the following as insured in-patient services:

- (i) accommodation and meals at the standard or public ward level,
- (ii) necessary nursing service,

- (iii) laboratory, radiological and other diagnostic procedures together with the necessary interpretations for the purpose of maintaining health, preventing disease and assisting in the diagnosis and treatment of any injury, illness or disability,
- (iv) drugs, biologicals and related preparations as provided in an agreement,
- (v) use of operating room, case room and anaesthetic facilities, including necessary equipment and supplies,
- (vi) routine surgical supplies,
- (vii) use of radiotherapy facilities where available,
- (viii) use of physiotherapy facilities where available,
- (ix) services rendered by persons who receive remuneration therefor from the hospital, and
- (x) such other services as are specified in an agreement.

(2) Out-Patient Services

While the federal law authorizes the Minister of National Health and Welfare to enter into an agreement to make contributions towards the costs of the above services on an out-patient basis as well, the law is permissive in this regard and the provinces are free to choose which, if any, out-patient services they propose to provide as insured services. At the end of the fiscal year under review, the following was the situation with regard to insured out-patient services:

In the agreement with British Columbia, out-patient cancer therapy in specified facilities is listed as an insured service.

A common feature of out-patient services provided in most of the provinces, is the provision of a fairly broad range of services in the specific event of an accident. In Ontario, these are provided within a period of 24 hours after an accident (Ontario also provides follow-up care in fracture cases). Under certain circumstances this period may be extended in Manitoba, Quebec, the Northwest Territories and the Yukon. In Nova Scotia and New Brunswick, emergency services are provided within a period of 48 hours of an accident, and follow-up care is included for a period of 90 days after an accident in New Brunswick.

In addition to these out-patient services provided for emergencies, most provinces now provide an increasing number and widening range of other out-patient services.

The Northwest Territories provide certain diagnostic procedures and necessary interpretations.

Alberta insured services include the services of the Provincial Cancer Clinics and the Provincial Laboratories and all services normally provided by a hospital to in-patients, including radiotherapy and physiotherapy where available. All out-patient services are subject to a 20% authorized charge payable by the patient.

In Saskatchewan, insured out-patient services include the services provided by a hospital in the course of providing diagnostic or treatment services, to the extent that these can be provided. All radiological and laboratory procedures and all physiotherapy and occupational therapy procedures are also insured out-patient services to the extent that these can be provided by the participating hospitals.

Manitoba provides surgical procedures, as designated; certain procedures related to medical rehabilitation and electro-shock therapy; the services provided through and by the Manitoba Cancer Treatment and Research Foundation; and the services provided by the Preschool Development Clinic administered by the Children's Hospital of Winnipeg.

Ontario provides certain medical and therapeutic procedures in cases where the procedure ordinarily would be carried out as an in-patient service, in specified hospitals. Out-patient services also include the use of radiotherapy, occupational therapy, physiotherapy and speech therapy facilities in specified hospitals.

Quebec provides minor surgical procedures as specified from time to time including necessary radiological and laboratory examinations which are directly related to these procedures, along with the examination of tissues together with the necessary interpretations. Quebec out-patient services also include psychiatric day care and night care in psychiatric departments of certain specified hospitals. Electro-shock and insulin shock therapy are insured services when provided in psychiatric departments of general hospitals in the province. Audiology, speech therapy, medical orthoptics, occupational therapy and cytological examinations are also covered under the plan as are prescribed radiotherapy and physiotherapy treatments in recognized hospitals.

In addition, all laboratory diagnostic tests are now covered as well as all radiology diagnostic examinations, including diagnostic tests using radioisotopes. Any other diagnostic test or procedure performed upon medical prescription, such as electroencephalograms, electrocardiograms, echo-encephalograms, vectorcardiograms, phonocardiograms and angioradiograms, are also included as insured services.

In New Brunswick, hospital services and facilities when provided for diagnostic and treatment procedures as authorized from time to time, including the use of the operating room, the use of surgical equipment and supplies, drugs and related preparations and laboratory, radiological and other diagnostic procedures together with the necessary interpretations are all insured out-patient services. Laboratory procedures when referred by a physician are insured services where approved facilities are available. Physiotherapy facilities where available are included as insured out-patient services.

Radiotherapy is provided for proven cases of cancer and electro-shock therapy is an insured service where available. Basal metabolic rate, E. C. G. and E. E. G. with interpretations are also insured under the program.

In Nova Scotia, the services of the tumour clinic and laboratory tests from time to time specified by the Commission, together with necessary interpretations, are insured. Nova Scotia also includes as insured out-patient services all medically necessary diagnostic radiological examinations. In addition, treatment facilities where available are insured for radiotherapy and physiotherapy. Minor medical and surgical procedures and the provision of blood, including blood fractions, are also insured out-patient services. Other insured services include diabetic day care clinics, pulmonary function tests and inhalation therapy.

Prince Edward Island provides laboratory and radiological procedures as specified, including the use of radioactive isotopes; drugs, biologicals and related preparations for emergency diagnosis and treatment; and all of the other services prescribed as in-patient services in the federal Act.

In Newfoundland, selected diagnostic and treatment procedures are provided as insured out-patient services, including psychiatric day care in two hospitals.

(3) Methods of Provincial Financing

Since the provinces devised their own methods for financing the provincial share of costs, a variety of methods of financing has emerged. Five provinces initially used a premium method, but two of those subsequently changed to general revenue; one province levies a sales (hospital) tax, while another levies a property tax. Other provinces finance their share of costs out of general revenue and, in some instances, a combination of methods is used.

The premium method is used in Saskatchewan, Manitoba and Ontario. It had been used in New Brunswick and Prince Edward Island but it was abolished in the former from January 1, 1961, and the latter from December 1, 1962.

The annual premium, or hospitalization tax as it is called, in Saskatchewan is \$24 and \$48 for single persons and families respectively. The funds derived from the hospitalization tax are augmented by general revenue funds.

The Manitoba monthly premium for single persons and families is \$2.00 and \$4.00 respectively. A 6% charge on personal income tax and an extra 1% tax on taxable income of corporations, are levied to provide for the provincial costs not covered by the premiums. A compulsory payroll deduction is applied for employed groups of three or more persons. Provision is also made to exempt from this group certain categories of persons for such reasons as temporary or part-time employment.

The Ontario monthly premium is \$3.25 for single persons and \$6.50 for families. Insured persons in Ontario are entitled to insured services and, in addition, to services over and above those included in the agreement under the Hospital Insurance and Diagnostic Services Act. The provincial program in that province includes insured services in mental hospitals and tuberculosis sanatoria. There is a compulsory payroll deduction clause in the Ontario law in relation to establishments of fifteen or more employees, including the employer, and their dependents. Unlike the majority of provinces, this category of residents is the only category with respect to whom insurance coverage is compulsory in the Province, the program being available to all others on a voluntary basis.

In all the premium provinces, reduced premium rates are levied with respect to the families of armed services personnel and members of the Royal Canadian Mounted Police.

British Columbia finances the provincial share of costs out of the general revenue of the Province (part of a provincial sales tax in British Columbia is paid into the general revenue fund for hospital insurance). A similar method of financing is used in Quebec, New Brunswick, Prince Edward Island, Newfoundland, the Yukon and the Northwest Territories. Both British Columbia and the Northwest Territories supplement this source of revenue by the levy of authorized charges discussed below. Alberta raises a portion of its share of costs from a mill rate levied on property, as well as levying an authorized charge. Nova Scotia finances its program through a five per cent sales tax.

Three provinces, Alberta, British Columbia and the Northwest Territories, have included in their Agreement provisions for levying authorized charges directly to patients for insured services. In Alberta, in-patients (other than newborn infants) are charged \$5.00 for the first day and \$2.50 for each succeeding day of hospitalization in general hospitals and \$1.50 per day in auxiliary hospitals. In the case of newborn infants in general hospitals a \$1.00 per day charge is made. An authorized charge of 20% is paid by the patient for out-patient services. British Columbia has an authorized charge of \$1.00 per day for in-patients and out-patients pay \$1.00 per visit for cancer therapy. In the Northwest Territories, in-patients are subject to an authorized charge of \$1.50 per day.

(c) Formula for Federal Contributions

The amount of the federal contributions to the provinces is calculated on the basis of a formula contained in the Hospital Insurance and Diagnostic Services Act. This formula has been designed in such a way as to provide a higher percentage of federal assistance to those provinces in which the per capita cost of hospital care is lower than the national average and to provide for a lower percentage federal contribution to the provinces, where the per capita cost exceeds the national average.

The federal contribution, as set out in the Act, is the aggregate in the year of twenty-five per cent of the per capita cost of in-patient services in Canada, that is the national per capita cost, and twenty-five per cent of the per capita cost of in-patient services in the province less the amount of authorized charges, multiplied by the average for the year of the number of insured persons in the province.

The effect of this formula is that the high-cost provinces receive a lower percentage of their costs from the Federal Government than do the low-cost provinces. The inclusion in the formula of the national

per capita cost, however, acts as a deterrent to all provinces, as increases or decreases in provincial in-patient costs change the federal contribution directly by only twenty-five per cent, the remaining twenty-five per cent federal contribution being spread over all provinces through the national per capita.

Since the federal contribution is calculated on an annual basis, provision is made in the Hospital Insurance Regulations for advances on account of contributions, so that the provinces are not required to wait for reimbursement in respect of the amounts which they are required to pay to hospitals on a continuing basis. In order to expedite the payment of advances and, at the same time, to forestall the likelihood of major financial adjustments after the end of the year, the formula which is used for the calculation of the advance payment provides for a small holdback. The formula for the advance, therefore, differs from the formula for the annual contribution in that twenty-three and one-half per cent of the per capita cost of in-patient services in Canada is paid instead of the twenty-five per cent provided for in the annual contribution calculation, and the amount of the advance, unlike the amount of the contribution itself, is calculated on the basis of provincial payments, which may or may not be shareable costs as defined in the law.

Since the amount of the federal payment is calculated on a formula which includes the per capita cost of in-patient hospital care in Canada, studies are carried out to ensure the continuing accuracy of this figure. Changes in the national per capita cost are made, subject to the approval of Treasury Board, at varying intervals as the situation requires. The purpose of making periodic adjustments in the national per capita is to maintain realistic advance payments and to eliminate major adjustments in the calculations of the federal contribution.

The costs which are shareable by the Federal Government are described in the federal legislation. The Act specifically excludes from shareable costs amounts expended on the capital cost of land, buildings or physical plant; on the payment of any capital debt or interest related to capital debt; on the payment of debt incurred prior to the coming into force of the agreement or on the interest related to such prior debt; or any provision for depreciation on the value of land, buildings or physical plant. The term "physical plant" is defined in the Regulations as excluding furniture and movable equipment, or non-movable equipment specially required for use in a hospital. Thus, these items are shareable.

In this connection it should be noted that most of the capital items which are, by definition, excluded from shareable costs, such as the costs of construction and other matters pertaining to physical

plant, are supported by the Federal Government through the National Health Grants program (particularly through the Hospital Construction Grant) and in some cases through the Health Resources Fund.

Generally speaking, shareable costs are the operating costs of the hospital which have been approved by the provincial authority and which have been determined in accordance with recognized and generally accepted accounting principles and procedures. The operating costs of a hospital as defined in the Regulations, however, specifically exclude some items which, although provided in or in connection with the hospital, are not considered to be an integral part of the operation of the hospital.

The province is required to review and approve as a basis of payment the costs of each hospital, and these approved costs form the basis of the federal sharing formula.

(d) Number of Insured Persons

The methods for determining the number of insured persons in a province and outlined in the Agreements differ, since the method used by a province to finance the provincial share of costs has a direct bearing on the availability of an actual count of insured persons. In the three Provinces which levy premiums, Ontario, Manitoba and Saskatchewan, insured persons are registered and identification certificates are provided. However, even in these circumstances the methods of registration differ. In Ontario and Manitoba, registration is for single persons and for the family head, but no actual count of the number of dependents of the family head is made. In order, therefore, to calculate the average number of persons in the province who are eligible for and entitled to insured services, a number which is required in connection with the federal contributions to the provinces, an estimate of the average number of dependents in these two provinces is made by the Dominion Statistician. In Saskatchewan, the registration method used by the Province consists of a head count including dependents.

Coverage is automatic or compulsory in all provinces except Ontario where persons employed in an undertaking having a total of 15 or more employed persons are the only mandatory groups, coverage being voluntary for the remaining population.

In provinces where no premiums are levied and where the provincial share of costs is paid out of general revenue, sales or property tax, no individual registration of insured persons is required and coverage is universal. Insofar as these provinces are concerned, provision was made in the Agreements for calculation of the number of insured persons on the basis of a population estimate for a given date in the year (June 1) as determined by the Dominion Statistician.

The Hospital Insurance Regulations define "population" to mean the population of Canada or the province, as certified by the Dominion Statistician, and, calculated for a calendar year in which a census was taken, as the population of Canada or of the province as ascertained by the census; for other than a census year, the population of Canada or of the province on the 1st day of June in that year according to published original intercensal estimates of the Dominion Statistician.

There are certain categories of persons with respect to whom hospital services are provided under a statute other than the hospital insurance legislation, and who are, therefore, not entitled to insured services. For the most part, these consist of members of the Armed Forces and the Royal Canadian Mounted Police. In addition, inmates of federal penitentiaries are provided with hospital services by the Federal Government. In the Dominion Bureau of Statistics population estimates, therefore, the number of the members of the regular forces, members of the Royal Canadian Mounted Police and persons serving terms of imprisonment in a federal penitentiary, amounting to some .6% of the total population, are deducted so as to provide a "net" population figure for the purpose of calculating the eligible population.

Table A shows by province, the number of insured persons on March 31, 1968 as reported for purposes of advance payments, the advance estimate of net population as of June 1, 1968 as provided by the Dominion Statistician and the percentage of insured persons to the total net population at the end of the fiscal year under review. It will be noted that in all but three provinces, all of the net population was entitled to insured services at the end of the year. It will also be noted that in Ontario, in spite of the partially voluntary aspect of that program, 97.5% of the net population was insured at the end of the year under review. In Canada as a whole, 99.0% of the net population was insured.

The percentage of insured persons in Canada on March 31, to net population, has increased steadily since the inception of the hospital insurance plan. 64.5% of the population were insured persons as of March 31, 1959. From that date until 1961, the large increases were due to the increasing number of provinces participating in the joint program. However, since 1961, the increases represent increases in the number of persons covered in provinces already participating in the plan and range from 97.7% in 1961 to 99.0% as of March 31, 1968.

Table B shows, by province, the net population of Canada as estimated by the Dominion Statistician and the percentage increase from year to year, from 1958 to 1967. It will be noted that the net population of Canada increased from 16,918,000 to 20,284,000 during these nine years. This population increase, totalling 3,366,000 persons, is 19.9%.

TABLE A

NUMBER OF INSURED PERSONS, BY PROVINCE, ON MARCH 31, 1968

PROVINCE	Number of Insured Persons March 31, 1968	Advance Estimate of Net Population June 1, 1968	Percentage of Persons Insured
Newfoundland	502,000	502,000	100
Prince Edward Island	108,000	108,000	100
Nova Scotia	743,000	743,000	100
New Brunswick	617,000	617,000	100
Quebec	5,926,000	5,926,000	100
Ontario	7,110,427	7,290,000	97.5
Manitoba	945,000	961,000	98.3
Saskatchewan	953,519	957,000	99.6
Alberta	1,516,000	1,516,000	100
British Columbia	2,008,000	2,008,000	100
Yukon	15,000	15,000	100
Northwest Territories	30,000	30,000	100
CANADA	20,473,946	20,673,000	99.0

TABLE B

NET POPULATION OF CANADA AS ESTIMATED BY DOMINION STATISTICIAN, BY PROVINCE
AND PERCENTAGE INCREASE OVER PREVIOUS YEAR, 1958 to 1967

	1958	1959		1960		1961*		1962		1963		1964		1965		1966*		1967	
	Population	Population	%	Population	%	Population	%	Population	%	Population	%	Population	%	Population	%	Population	%	Population	%
Nfld.	436,000	448,000	2.8	457,000	2.0	456,265	-0.2	468,000	2.6	479,000	2.4	490,000	2.3	497,000	1.4	492,157	-1.0	499,000	1.4
P.E.I.	99,000	101,000	2.0	102,000	1.0	103,531	1.5	105,000	1.4	105,000	—	106,000	1.0	106,000	—	106,891	0.8	107,000	0.1
N.S.	691,000	696,000	0.7	702,000	0.9	716,552	2.1	724,000	1.0	734,000	1.4	739,000	0.7	742,000	0.4	737,811	-0.6	739,000	0.2
N.B.	571,000	583,000	2.1	593,000	1.7	590,015	-0.5	600,000	1.7	606,000	1.0	609,000	0.5	615,000	1.0	608,469	-1.1	612,000	0.6
Que.	4,866,000	4,980,000	2.3	5,087,000	2.1	5,240,328	3.0	5,346,000	2.0	5,450,000	1.9	5,546,000	1.8	5,640,000	1.7	5,765,427	2.2	5,851,000	1.5
Ont.	5,759,000	5,908,000	2.6	6,046,000	2.3	6,192,034	2.4	6,294,000	1.6	6,402,000	1.7	6,540,000	2.2	6,688,000	2.3	6,920,740	3.5	7,111,000	2.7
Man.	859,000	874,000	1.7	888,000	1.6	911,476	2.6	924,000	1.4	939,000	1.6	947,000	0.9	952,000	0.5	953,014	0.1	953,000	-0.1
Sask.	885,000	899,000	1.6	907,000	0.9	921,447	1.6	927,000	0.6	930,000	0.3	939,000	1.0	947,000	0.9	951,574	0.5	954,000	0.3
Alta.	1,190,000	1,232,000	3.5	1,272,000	3.2	1,320,844	3.8	1,358,000	2.8	1,393,000	2.6	1,420,000	1.9	1,440,000	1.4	1,453,242	0.9	1,481,000	1.9
B.C.	1,530,000	1,556,000	1.7	1,594,000	2.4	1,615,707	1.4	1,645,000	1.8	1,681,000	2.2	1,724,000	2.6	1,775,000	3.0	1,860,846	4.8	1,934,000	3.9
Yukon	12,000	13,000	8.3	13,000	—	14,161	8.9	14,000	-1.1	15,000	7.1	15,000	—	15,000	—	14,036	-6.4	14,000	0.3
N.W.T.	20,000	20,000	—	21,000	5.0	22,264	6.0	24,000	7.8	24,000	—	25,000	4.2	25,000	—	28,242	13.0	29,000	2.7
CANADA	16,918,000	17,310,000	2.3	17,682,000	2.1	18,104,624	2.4	18,429,000	1.8	18,758,000	1.8	19,100,000	1.8	19,442,000	1.8	19,892,449	2.3	20,284,000	2.0

* Census Year

On an annual basis, the increase for Canada has averaged approximately 2% and it will be noted that increases have been recorded in most years in each individual province.

(e) Federal Payments

During the year under review, payments to the provinces consisted of the regular monthly advance payments on a current basis and the payment of the final contribution based on shareable costs for the calendar year 1965. A special further advance on account of the contributions to the provinces, payable on the submission of acceptable final cost reports, was provided for through an amendment to the Hospital Insurance Regulations. The final payment of the federal contribution for 1965 was completed in March 1968, and a special further advance was made to Prince Edward Island following receipt of their cost reports for 1966. Table C summarizes these payments. The advance payments to the provinces for the year under review amounted to \$459,244,980.96, and the final payments \$9,366,408.92, making a total of \$468,611,389.88.

Table D shows the total payments by fiscal year, to participating provinces since the inception of the hospital insurance program on July 1, 1958, totalling over three billion dollars. It should be recalled that in 1958-59, only five provinces (Newfoundland, Manitoba, Saskatchewan, Alberta and British Columbia) participated at the beginning of the program, while two additional provinces (Nova Scotia and Ontario) operated programs for three months only. These seven provinces were joined during the fiscal year 1959-60 by two other provinces which operated programs for only part of that fiscal year (New Brunswick from July 1 and Prince Edward Island from October 1). During the fiscal year 1960-61 the remaining provinces commenced to participate in the program (Northwest Territories, April 1, 1960; Yukon, July 1, 1960; and Quebec, January 1, 1961). The fiscal year 1961-62 was the first year during which all of the provinces were participating for the full fiscal year.

Factors which must be considered in connection with the payments shown in this Table are the increase in population accompanied by a corresponding increase in the number of hospital beds which were made available to meet the needs of the increasing population; and increasing hospital costs due in a large part to readjustments in salaries and wages which form a substantial percentage of overall hospital expenditures. During the period there has been an increase in the out-patient services provided to insured persons, a broadening of the benefits for the chronically ill and cost increases due to advances made in medical science.

TABLE C

SUMMARY OF PAYMENTS MADE BY CANADA, BY PROVINCE
1967-68 FISCAL YEAR

PROVINCE	Advance Payments			Final Payments*	Total Payments
	In-Patient	Out-Patient	Total		
Newfoundland	\$ 14,288,088.00	\$ 886,885.88	\$ 15,174,973.88	\$ 351,358.17	\$ 15,526,332.05
Prince Edward Island	2,779,563.71	356,153.55	3,135,717.26	216,741.39**	3,352,458.65
Nova Scotia	21,611,935.54	1,776,638.24	23,388,573.78	586,007.96	23,974,581.74
New Brunswick	18,266,802.66	714,619.27	18,981,421.93	509,882.85	19,491,304.78
Quebec	-	-	-	-	-
Ontario	225,365,837.06	4,335,752.24	229,701,589.30	5,144,031.25	234,845,620.55
Manitoba	28,877,108.17	1,047,549.24	29,924,657.41	689,459.93	30,614,117.34
Saskatchewan	29,348,020.29	2,119,734.46	31,467,754.75	828,482.06	32,296,236.81
Alberta	45,224,769.55	3,992,031.98	49,216,801.53	550,609.03	49,767,410.56
British Columbia	56,578,715.79	372,783.90	56,951,499.69	464,445.87	57,415,945.56
Yukon	382,502.95	4,429.76	386,932.71	5,304.92	392,237.63
Northwest Territories	887,570.03	27,488.69	915,058.72	20,085.49	935,144.21
CANADA	\$ 443,610,913.75	\$ 15,634,067.21	\$ 459,244,980.96	\$ 9,366,408.92	\$ 468,611,389.88

* Final payments for the 1965 calendar year.

** Including a special payment of \$115,242.71 with respect of the 1966 calendar year.

TABLE D

PAYMENTS BY CANADA - IN EACH FISCAL YEAR, BY PROVINCE
JULY 1, 1958 TO MARCH 31, 1968

PROVINCE	1958-59	1959-60	1960-61	1961-62	1962-63
	\$	\$	\$	\$	\$
Newfoundland	2,857,886.84	4,707,692.94	5,094,934.21	6,258,287.26	7,472,463.28
Prince Edward Island	—	447,338.27	1,010,806.54	1,381,894.39	1,673,681.11
Nova Scotia	1,572,782.64	8,162,540.78	9,595,387.52	11,872,932.01	13,519,974.70
New Brunswick	—	4,575,374.90	7,914,412.71	9,546,774.26	10,894,711.87
Quebec ¹	—	—	13,936,740.72	73,022,517.78	88,713,635.41
Ontario	13,140,213.12	71,892,833.66	84,484,271.86	104,498,880.55	122,103,382.61
Manitoba	7,148,534.97	11,324,466.35	13,048,916.19	15,245,924.23	17,348,934.08
Saskatchewan	8,430,441.93	13,378,379.43	14,453,463.99	15,953,810.19	18,278,458.50
Alberta	8,774,575.68	15,698,727.86	16,905,597.57	19,730,547.07	25,784,973.30
British Columbia	12,784,038.88	20,406,091.56	22,493,438.52	25,697,550.94	30,049,147.43
Yukon	—	—	168,683.75	296,036.35	310,267.36
Northwest Territories	—	—	261,849.89	377,941.52	523,148.02
CANADA	54,708,474.06	150,593,445.75	189,368,503.47	283,883,096.55	336,672,777.67

¹ Excluding an amount of \$32,159,930.88 paid to Quebec for January, February and March, 1965, which has been recovered upon the signing of the supplementary agreement under the Established Programs (Interim Arrangements) Act.
The amounts paid in 1965-66 and 1966-67 are the final payments with respect to calendar years 1963 and 1964 respectively.

TABLE D
PAYMENTS BY CANADA - IN EACH FISCAL YEAR, BY PROVINCE
JULY 1, 1958 TO MARCH 31, 1968

PROVINCE	1963-64	1964-65	1965-66	1966-67	1967-68	TOTAL
	\$	\$	\$	\$	\$	\$
Newfoundland	8,724,909.88	9,623,951.21	11,649,657.78	13,051,014.23	15,526,332.05	84,967,129.68
Prince Edward Island	1,922,524.26	2,102,585.78	2,436,076.68	2,732,005.91	3,352,458.65	17,059,371.59
Nova Scotia	15,174,842.90	15,902,172.05	18,078,038.58	20,513,638.61	23,974,581.74	138,366,891.53
New Brunswick	12,611,337.91	13,750,895.84	14,919,440.31	16,678,359.95	19,491,304.78	110,382,612.53
Quebec ¹	113,848,887.58	95,998,751.05	5,299,733.76	4,029,615.29	-	394,849,881.59
Ontario	136,039,776.87	151,477,498.15	171,899,251.27	194,692,978.40	234,845,620.55	1,285,074,707.04
Manitoba	19,664,963.78	20,947,876.73	23,131,484.98	26,198,959.56	30,614,117.34	184,674,178.21
Saskatchewan	21,312,084.05	23,526,106.20	25,868,645.55	28,598,031.35	32,296,236.81	202,095,658.00
Alberta	28,310,623.43	31,447,963.95	36,859,944.96	41,942,604.55	49,767,410.56	275,222,968.93
British Columbia	33,687,396.64	36,057,502.19	40,545,529.34	47,821,288.72	57,415,945.56	326,957,929.78
Yukon	349,443.34	307,577.82	356,797.56	364,203.56	392,237.63	2,545,247.37
Northwest Territories	597,444.71	579,608.16	721,748.44	767,682.75	935,144.21	4,764,567.70
CANADA	392,244,235.35	401,722,489.13	351,766,349.21	397,390,382.88	468,611,389.88	3,026,961,143.95

Table E shows the total contributions by province, by calendar year instead of by fiscal year as was shown in Table D. As explained earlier, hospital insurance contributions are calculated on the basis of the calendar year. It will be noted that the amounts shown for 1958 to 1965 represent both advance payments and final payments. The amounts shown for 1966 and 1967 represent advance payments only and the amounts shown for 1968 represent advance payments for the first three months of that calendar year ended March 31, 1968.

(f) Final Contribution for 1965

The final contributions payable for 1965 and paid during the fiscal year under review were calculated on the basis of the formula set out in the Hospital Insurance and Diagnostic Services Act and described in section 1(c) of this report. The per capita cost of in-patient services in 1965 is shown in Table F. It will be noted that the national per capita cost was \$48.25 and that in four provinces the cost exceeded this national figure. As a result, in these provinces the federal contribution represented a percentage of less than 50%, whereas the provinces in which the per capita cost was less than the national, received contributions exceeding 50% of their shareable costs.

Table G shows particulars of the total contribution for in-patient services in 1965. The contribution totalled over \$326 million.

Table H shows the amount of the federal contribution made for insured out-patient services in 1965. The scope of insured out-patient services, as evidenced in this Table, varies considerably between provinces. The federal contribution towards the cost of out-patient services in a province is in the same proportion as the federal contribution for in-patient services in that province.

Table J shows the total contribution payable by Canada to participating provinces with respect to 1965, totalling more than 336 million dollars. It will be recalled, however, that advances had been made to the provinces in an amount exceeding 326 million dollars so that the final payment for 1965 totalled about ten million dollars.

Table K sets out the details of the cost of in-patient services in 1965 in each of the provinces. It will be noted that the provincial costs shown on the last line of this table are the final in-patient costs reported in Table F. This table shows the amount included or deducted in computing the in-patient costs.

The amounts shown for room differentials in the offset income section (Table F) amount to 50% of the net earnings of the hospitals from charges for private and semi-private accommodation over and

TABLE E

PAYMENTS BY CANADA - IN RESPECT OF EACH CALENDAR YEAR, BY PROVINCE
JULY 1, 1958 TO MARCH 31, 1968

PROV.	Payments by Canada											
	Total Contributions						Advances on Contributions					
	1958	1959	1960	1961	1962	1963	1964	1965	1966	1967	1968	
	\$	\$	\$	\$	\$	\$	\$	\$	\$	\$	\$	
Nfld.	1,990,135.23	4,788,013.82	5,603,586.29	6,185,656.98	7,043,349.59	8,052,704.58	9,561,035.91	11,446,768.92	12,449,231.14	14,337,109.78	3,509,537.44	
P.E.I.	—	235,524.49	1,146,084.16	1,312,097.61	1,509,060.68	1,888,459.30	2,098,661.51	2,372,218.48	2,712,863.62	3,027,590.67	756,811.07	
N.S.	—	8,149,539.76	9,991,458.82	11,569,797.35	12,867,987.74	14,287,102.03	15,965,999.37	17,769,112.22	19,324,907.06	22,656,675.08	5,784,312.10	
N.B.	—	3,331,614.19	7,409,672.94	9,720,034.19	10,987,945.69	12,028,950.31	13,410,238.57	14,599,504.29	15,590,377.85	18,313,449.86	4,990,824.64	
Que.	—	—	—	77,241,386.65	90,370,182.25	106,052,520.98	121,185,791.71	—	—	—	—	
Ont.	—	72,495,107.96	86,597,900.15	99,986,577.72	115,404,446.25	130,981,226.31	148,102,438.65	167,339,147.01	184,975,762.62	219,511,419.83	59,680,680.54	
Man.	4,779,865.66	11,556,009.75	13,229,363.97	15,053,607.08	16,693,750.81	18,631,071.02	20,541,234.36	22,821,501.72	24,599,445.96	29,028,853.06	7,739,474.82	
Sask.	5,775,875.67	13,276,380.46	14,893,775.21	16,055,698.34	17,678,472.09	20,412,926.34	23,015,747.02	25,338,014.76	27,136,546.18	30,584,658.70	7,927,563.23	
Alta.	6,494,722.50	15,345,668.80	18,200,793.60	20,758,780.56	23,490,819.80	26,992,351.64	30,350,922.57	33,986,339.68	40,440,742.88	47,572,630.68	11,589,196.22	
B.C.	8,609,463.00	20,033,811.20	23,309,699.60	26,075,248.99	28,755,093.50	31,837,299.50	35,008,061.20	39,400,207.50	44,556,293.39	54,839,222.29	14,533,529.61	
Yukon	—	—	124,314.31	288,978.79	321,057.29	310,920.14	329,288.48	327,077.07	354,045.19	383,126.96	106,439.14	
N.W.T.	—	—	208,049.96	391,527.84	481,149.26	564,340.32	580,146.48	694,705.27	718,347.64	864,727.15	261,573.73	
CANADA	27,650,062.06	149,211,670.43	180,714,699.01	284,639,392.10	325,603,314.95	372,039,872.47	420,149,565.83	336,094,596.92	372,858,563.53	441,119,464.06	116,869,942.59	
Cumulative Total	27,650,062.06	176,861,732.49	357,576,431.50	642,215,823.60	967,819,138.55	1,339,859,011.02	1,760,008,576.85	2,096,103,173.77	2,468,961,737.30	2,910,081,201.36	3,026,961,143.95	

TABLE F

COST OF IN-PATIENT SERVICES 1965; NET POPULATION, JUNE 1, 1965;
TOTAL AND 25% PER CAPITA COST, 1965, BY PROVINCE

PROVINCE	Cost of In-Patient Services 1965	Net Population June 1 1965	Per Capita Cost	
			Total 1965	25%
Newfoundland	\$ 19,671,851.82	497,000	39.5812	9.8953
Prince Edward Island	3,329,897.29	106,000	31.4141	7.8535
Nova Scotia	30,074,794.06	742,000	40.5321	10.1330
New Brunswick	27,276,866.91	615,000	44.3526	11.0882
Quebec	282,327,805.53	5,640,000	50.0581	12.5145
Ontario	339,967,782.00	6,688,000	50.8325	12.7081
Manitoba	42,153,081.13	952,000	44.2784	11.0696
Saskatchewan	48,633,495.78	947,000	51.3553	12.8388
Alberta	67,546,720.76	1,440,000	46.9074	11.7269
British Columbia	74,903,118.85	1,775,000	42.1989	10.5497
Yukon	570,845.65	15,000	38.0564	9.5141
Northwest Territories	1,570,537.21	25,000	68.8215	15.7054
CANADA	\$938,026,796.99	19,442,000	\$48.2474	\$12.0619

TABLE G

CONTRIBUTION BY CANADA WITH RESPECT TO IN-PATIENT SERVICES, 1965

PROVINCE	25% of National Per Capita	25% of Provincial Per Capita	Less 25% Per Capita Authorized Charges	Aggregate Per Capita Cost	Average Number of Insured Persons	In-Patient Contribution by Canada
Newfoundland	\$12.0619	\$ 9.8953	—	\$21.9572	497,000	\$ 10,912,728.40
Prince Edward Island	12.0619	7.8535	—	19.9154	106,000	2,111,032.40
Nova Scotia	12.0619	10.1330	—	22.1949	742,000	16,468,615.80
New Brunswick	12.0619	11.0882	—	23.1501	615,000	14,237,311.50
Quebec	12.0619	12.5145	—	24.5764	5,640,000	—
Ontario	12.0619	12.7081	—	24.7700	6,607,195	163,660,220.15
Manitoba	12.0619	11.0696	—	23.1315	952,000	22,021,188.00
Saskatchewan	12.0619	12.8388	—	24.9007	941,868	23,453,172.51
Alberta	12.0619	11.7269	\$0.9978	22.7910	1,440,000	32,819,040.00
British Columbia	12.0619	10.5497	0.4143	22.1973	1,775,000	39,400,207.50
Yukon	12.0619	9.5141	—	21.5760	15,000	323,640.00
Northwest Territories	12.0619	15.7054	0.6873	27.0800	25,000	677,000.00
Total Contributions By Canada for In-Patient Services, 1965						\$326,084,156.26

TABLE H

CONTRIBUTION BY CANADA WITH RESPECT TO OUT-PATIENT SERVICES, 1965

PROVINCE	In-Patient Contribution	In-Patient Cost Less Authorized Charges	Out-Patient Cost	Out-Patient Contribution
Newfoundland	\$ 10,912,728.40	\$ 19,671,851.82	\$ 962,689.21	\$ 534,040.52
Prince Edward Island	2,111,032.40	3,329,897.29	411,989.33	261,186.08
Nova Scotia	16,468,615.80	30,074,794.06	2,374,951.40	1,300,496.42
New Brunswick	14,237,311.50	27,276,866.91	593,915.04	362,192.79
Quebec	-	282,327,805.53	3,862,327.85	-
Ontario	163,660,220.15	339,967,782.00	7,642,154.00	3,678,926.86
Manitoba	22,021,188.00	42,153,081.13	1,531,965.00	800,313.72
Saskatchewan	23,453,172.51	48,633,495.78	3,908,489.03	1,884,842.25
Alberta	32,819,040.00	61,799,297.36	2,198,062.47	1,167,299.68
British Columbia	39,400,207.50	71,961,963.85	-	-
Yukon	323,640.00	570,845.65	6,062.40	3,437.07
Northwest Territories	677,000.00	1,501,811.71	39,276.20	17,705.27
			\$23,631,881.93	\$10,010,440.66

TABLE J
TOTAL CONTRIBUTIONS AND FINAL PAYMENTS MADE BY CANADA
BY PROVINCE WITH RESPECT TO 1965

PROVINCE	Contribution by Canada			Less: Regular Advances	Final Payments*
	In-patient	Out-patient	Total		
Newfoundland	\$ 10,912,728.40	\$ 534,040.52	\$ 11,446,768.92	\$ 11,095,410.75	\$ 351,358.17
Prince Edward Island	2,111,032.40	261,186.08	2,372,218.48	2,270,719.80	101,498.68
Nova Scotia	16,468,615.80	1,300,496.42	17,769,112.22	17,183,104.26	586,007.96
New Brunswick	14,237,311.50	362,192.79	14,599,504.29	14,089,621.44	509,882.85
Quebec	—	—	—	—	—
Ontario	163,660,220.15	3,678,926.86	167,339,147.01	162,195,115.76	5,144,031.25
Manitoba	22,021,188.00	800,313.72	22,821,501.72	22,132,041.79	689,459.93
Saskatchewan	23,453,172.51	1,884,842.25	25,338,014.76	24,509,532.70	828,482.06
Alberta	32,819,040.00	1,167,299.68	33,986,339.68	33,435,730.65	550,609.03
British Columbia	39,400,207.50	—	39,400,207.50	38,935,761.63	464,445.87
Yukon	323,640.00	3,437.07	327,077.07	321,772.15	5,304.92
Northwest Territories	677,000.00	17,705.27	694,705.27	674,619.78	20,085.49
CANADA	\$326,084,156.26	\$10,010,440.66	\$336,094,596.92	\$326,843,430.71	\$9,251,166.21

* Including special advances

COST OF IN-PATIENT SERVICES, BY PROVINCE, 1965

	Newfoundland	Prince Edward Island	Nova Scotia	New Brunswick	Quebec	Ontario
1. Hospitals listed in Part I of Schedule "A":						
Operating Expenses	\$20,275,883.43	\$4,300,118.82	\$37,619,351.00	\$32,917,712.14	\$340,068,703.35	\$403,656,575.00
Less:						
Ancillary Operations	40,336.47	—	—	—	86,271.64	165,238.00
Interest on loans	54,031.89	98,511.24	900,698.63	1,336,615.47	8,958,023.22	3,120,257.00
Depreciation	1,325,311.27	183,205.70	1,148,234.88	1,910,058.76	5,936,608.86	11,547,766.00
Direct Cost: Research Projects	—	—	7,797.30	—	2,149,848.30	2,941,816.00
Ambulance Service	14,749.69	—	35,444.98	54,938.12	224,437.03	39,420.00
O.P.D.	133,129.35	—	171,044.39	—	2,519,710.32	2,614,964.00
Unapproved Expenses	151,301.46	46,448.65	700,064.36	93,322.70	5,637,944.16	2,001,190.00
Offset Income:						
Federal Government	139,872.60	53,779.00	102,507.50	70,593.40	136,104.65	404,921.00
Workmen's Compensation	251,047.50	37,108.00	421,749.00	444,388.45	3,761,474.96	6,866,444.00
Non-Residents	95,979.35	74,389.50	675,864.25	1,012,878.05	3,609,965.17	5,576,565.00
Care Deemed Unnecessary	4,006.00	2,488.00	6,907.75	10.95	75,173.75	119,845.00
Room Differential	165,231.83	81,950.25	775,038.41	761,882.69	10,118,014.87	9,869,913.00
Non-Benefit Drugs	—	—	3,466.31	—	16,275.94	14,113.00
Out-Patient Services	1,350,144.06	448,076.51	2,742,988.69	—	15,087,663.86	22,119,995.00
Health Grants	79,396.34	—	—	—	1,391,728.61	428,614.00
Recoveries and Sales	1,003,300.56	184,124.19	1,445,695.04	1,495,751.23	11,126,379.33	12,768,867.00
Other Income	20,348.75	18,626.48	73,059.54	~ 34,384.73	1,111,978.35	636,094.00
Other Deductions	136,017.96	—	—	8,810.93	2,606,108.30	749,222.00
Total Deductions	4,964,205.08	1,228,707.52	9,210,561.03	8,708,968.30	74,553,711.32	81,985,244.00
Net Operating Costs	15,311,678.35	3,071,411.30	28,408,789.97	24,208,743.84	265,514,992.03	321,671,331.00
2. Provincial Payments:						
Equipment	3,499,973.02	—	200,432.98	1,346,127.84	—	—
Contract Hospitals	337,833.39	24,555.54	192,691.37	94,789.01	10,017,553.18	9,371,108.00
Federal Hospitals	21,109.00	—	961,778.00	698,272.66	3,927,723.44	6,678,802.00
Out-of-Province Care	561,136.41	248,855.03	439,225.57	1,015,749.65	4,717,149.51	4,222,977.00
3. Authorized Charges:						
Contract Hospitals	—	—	—	—	—	—
Federal Hospitals	—	—	—	—	—	—
4. Sub-Total	19,731,730.17	3,344,821.87	30,202,917.89	27,363,683.00	284,177,418.16	341,944,218.00
5. Amounts Recovered	59,878.35	14,924.58	128,123.83	86,816.09	1,849,612.63	1,976,436.00
6. Cost of In-Patient Services	\$19,671,851.82	\$3,329,897.29	\$30,074,794.00	\$27,276,866.91	\$282,327,805.53	\$339,967,782.00

TABLE K (cont'd)

	Manitoba	Saskatchewan	Alberta	British Columbia	Yukon	Northwest Territories
1. Hospitals listed in Part I of Schedule "A":						
Operating Expenses	\$50,536,156.13	\$59,200,999.94	\$83,615,996.50	\$86,656,547.94	\$148,950.36	\$ 367,877.45
Less:						
Ancillary Operations	-	40,261.57	80,759.06	2,740.24	-	-
Interest on loans	963,407.00	518,528.67	3,479,077.59	59,895.65	-	213.35
Depreciation	1,011,719.00	1,935,241.46	4,322,043.05	4,686,612.28	-	28,198.73
Direct Cost: Research Projects	-	6,741.71	182,085.94	1,898.51	-	-
Ambulance Service	596.00	6,767.49	-	9,127.38	-	-
O.P.D.	1,505,606.00	-	115,282.03	340,620.56	-	-
Unapproved Expenses	123,169.00	502,426.42	1,761,106.74	673,972.37	-	3,776.46
Offset Income:						
Federal Government	65,878.00	408,403.19	328,862.00	155,330.85	200.00	6,533.00
Workmen's Compensation	584,372.00	459,285.49	1,135,976.40	1,938,305.42	9,610.00	15,845.00
Non-Residents	1,726,899.00	721,187.53	943,964.96	1,078,077.03	5,103.00	14,148.00
Care Deemed Unnecessary	56,955.00	4,127.35	-	366,264.65	-	1,496.00
Room Differential	698,393.00	388,115.78	1,031,287.93	1,024,460.48	-	-
Non-Benefit Drugs	-	639,486.06	26,434.31	29,793.94	-	-
Out-Patient Services	1,795,495.00	3,556,990.65	3,738,096.76	3,880,519.88	14,358.28	28,511.46
Health Grants	24,213.00	10,026.89	38,551.92	793,889.56	-	-
Recoveries and Sales	2,042,959.00	1,530,973.83	2,889,670.37	2,859,124.75	5,697.70	6,689.45
Other Income	254,617.00	394,343.87	146,880.53	131,817.54	253.78	67.47
Other Deductions	83,145.00	1,235,417.00	886,062.56	65,430.69	-	-
Total Deductions	10,937,423.00	12,358,324.96	21,106,142.15	18,097,881.78	35,222.76	105,478.92
Net Operating Costs	39,598,733.13	46,842,674.98	62,509,854.35	58,558,666.16	113,727.60	262,398.53
2. Provincial Payments:						
Equipment	26,714.00	103,414.09	1,753,825.14	2,083,360.63	1,036.39	90,628.33
Contract Hospitals	594,206.00	219,601.26	523,502.29	475,045.49	312.57	245,063.89
Federal Hospitals	1,488,815.00	463,702.04	1,797,570.90	3,376,631.50	356,293.00	420,933.10
Out-of-Province Care	632,191.00	1,122,619.60	882,828.81	621,545.83	99,779.34	500,356.96
3. Authorized Charges:						
Contract Hospitals	-	-	16,871.60	9,867.00	-	22,158.00
Federal Hospitals	-	-	278,008.60	179,836.00	-	29,209.50
4. Sub-Total	42,340,659.13	48,752,011.97	67,762,461.69	75,304,952.61	571,148.90	1,570,748.31
5. Amounts Recovered	187,578.00	118,516.19	215,740.93	401,833.76	303.25	211.10
6. Cost of In-Patient Services	\$42,153,081.13	\$48,633,495.78	\$67,546,720.76	\$74,903,118.85	\$570,845.65	\$1,570,537.21

above standard ward rates. In Newfoundland, Nova Scotia, Ontario and Saskatchewan the full 50% is left with the hospitals; in Quebec and British Columbia 40% is left; in New Brunswick 25%; in Manitoba 20%; while in Prince Edward Island and Alberta the hospitals do not retain any of this income. In the Yukon and Northwest Territories, there are no extra charges for private or semi-private accommodation.

The provincial payments to federally-owned hospitals are shown in paragraph 2 of Table K. These are payments for insured in-patient services rendered to insured persons in hospitals operated by the Departments of Veterans Affairs, National Defence and National Health and Welfare.

When insured services are furnished to a person in respect of an injury or disability, where such person is legally entitled to recover the cost of such services from some other person by way of damages, the hospital account is paid by the provincial authority, and action is then taken to recover the cost from the responsible third party. The amounts so recovered in respect of insured in-patient services are shown on the second last line of Table K.

(g) Comparative Data

It has been explained previously that essential parts of the formula for the payment of contributions to the provinces are the per capita cost of in-patient services in the provinces, and the per capita cost of in-patient services in Canada. For the final calculation of the federal contribution, these per capita costs are based on actual shareable costs as defined in the Hospital Insurance Regulations. In making comparisons with the amounts of the final contributions as set out in earlier reports to Parliament, it should be remembered that, for the calendar year 1959, only seven provinces participated in the joint program for the whole of the calendar year, Nova Scotia and Ontario having commenced on January 1, 1959. Insofar as the calendar year 1958 was concerned, only the original five provinces were participating (Newfoundland, Manitoba, Saskatchewan, Alberta and British Columbia) and these joint programs only commenced on July 1st of that year. Commencing January 1, 1965, the method of payment to the Province of Quebec was subject to a special agreement made under the terms of the Established Programs (Interim Arrangements) Act so that while the shareable costs in Quebec were determined in the same manner as for the other provinces, the resulting contribution was not made under the Hospital Insurance and Diagnostic Services Act, but was included in calculating the adjustment made by the Department of Finance.

Table L shows the per capita cost of in-patient services and the percentage increase of these per capita costs over the previous year, by province, for the calendar years from 1958 to 1965 inclusive. The per capita costs shown for 1965 are based without exception on the shareable in-patient costs in all provinces, and show a national per capita cost of \$48.25. This represents an increase of 10.9% over the national per capita cost for 1964 which was \$43.52. This cost, in turn, represented an increase of 10.3% over the per capita cost for 1963 which was \$39.44.

Table M shows the final cost of in-patient services for the calendar years from 1958 to 1965 inclusive, by province, and it also shows the percentage increase over the previous year for each cost figure. The amounts shown for the calendar year 1965 were, in all instances, the actual shareable costs as defined in the Hospital Insurance Regulations and the total amount of more than \$938 million represented an increase of 12.8% over the amount shown as the final cost for 1964. The final cost for 1964, which amounted to some \$831 million, was 12.4% more than the final cost in 1963.

2. Advisory Committee on Hospital Insurance and Diagnostic Services

Close cooperation between the Federal and Provincial Governments in matters relating to the Hospital Insurance and Diagnostic Services Program has resulted from the sixteen meetings of the above Committee since its establishment in November 1959. At that time, it was intended that the Committee would advise and make recommendations to the Minister of National Health and Welfare on matters relating to hospital services and resources in general, and to the operation of provincial programs under the Hospital Insurance and Diagnostic Services Act, in particular. The Committee's terms of reference also included the duty of facilitating cooperation between provincial authorities with a view to enabling a full exchange of information and a better coordination of efforts and activities in order to ensure the development and maintenance of the high standards of hospital care.

The Advisory Committee held two meetings in Ottawa during the year under review, one on May 8 and 9, and the other on November 14 and 15, 1967.

At the meeting of the Advisory Committee held in the spring of 1967, in addition to discussions relating to a variety of technical problems such as proposals to change the hospital year-end to agree with the provincial fiscal year, to increase the financial support to the Blood Transfusion Service of the Canadian Red Cross Society, various progress reports were submitted for consideration from the following sub-committees; Quality of Care, Research and Statistics, Finance and Accounting, Residence and Uniformity of Benefits. Moreover, reports on the Health

TABLE L
PER CAPITA COST OF IN-PATIENT SERVICES, AND PERCENTAGE INCREASE
OVER PREVIOUS YEAR, BY PROVINCE, 1958 to 1965

PROV. INCE	1958		1959		1960		1961		1962		1963		1964		1965	
	Cost	Increase	Cost	Increase	Cost	Increase	Cost	Increase	Cost	Increase	Cost	Increase	Cost	Increase	Cost	Increase
Nfld.	\$13,760.3	18.5	\$16,30.39	18.5	\$18,419.9	13.0	\$19,533.9	6.0	\$21,446.5	9.8	\$24,203.9	12.9	\$30,862.2	27.5	\$39,581.2	28.3
P.E.I.	15,224.9	2.9	15,671.9	2.9	19,232.1	22.7	23,006.3	19.6	24,874.9	8.1	26,615.6	7.0	29,393.9	10.4	31,414.1	6.9
N. S.	17,294.0	19.7	20,693.8	19.7	25,168.1	21.6	28,315.7	12.5	30,620.5	8.1	33,437.5	9.2	37,052.7	10.8	40,532.1	9.4
N. B.	16,467.8	29.0	21,240.8	29.0	27,436.0	29.2	32,722.6	19.3	36,126.6	10.4	38,460.8	6.5	42,577.8	10.7	44,352.6	4.2
Que.	17,658.2	6.1	18,739.9	6.1	21,364.3	14.0	26,991.9	26.3	32,005.9	18.6	37,427.5	16.9	42,674.7	14.0	50,058.1	17.3
Ont.	22,024.5	24.6	27,451.6	24.6	31,834.5	16.0	35,034.3	10.1	38,957.9	11.2	42,689.8	9.6	46,736.8	9.5	50,832.5	8.8
Man.	22,841.1	21.9	27,851.6	21.9	31,136.3	11.8	33,489.9	7.6	35,837.1	7.0	38,720.8	8.0	40,697.5	5.1	44,278.4	8.8
Sask.	32,052.3	8.3	34,721.6	8.3	37,380.6	7.7	38,812.1	3.8	40,885.9	5.3	44,029.1	7.7	47,839.9	8.7	51,355.3	7.3
Alta.	25,661.9	12.4	28,848.7	12.4	32,906.3	14.1	35,000.2	6.4	37,788.1	8.0	41,065.6	8.7	45,213.9	10.1	46,907.4	3.7
B. C.	25,261.6	12.2	28,351.4	12.2	31,738.6	11.9	34,268.6	8.0	35,986.6	5.0	37,985.6	5.6	39,355.0	3.6	42,198.9	7.2
Yukon)					47,950.2	295.2	49,200.3	2.6	55,635.8	13.1	43,029.6	-22.7	43,408.0	0.9	38,056.4	-12.3
)	13,084.3	-33.5	8,707.5	-33.5	26,440.6	308.0	40,518.3	53.2	46,172.8	14.0	55,985.9	21.3	49,643.0	-11.3	62,821.5	26.5
N. W. T.)																
CANADA	\$21,232.9	16.1	\$24,640.5	16.1	\$28,314.0	14.9	\$31,967.3	12.9	\$35,607.7	11.4	\$39,443.0	10.8	\$43,523.0	10.3	\$48,247.4	10.9

TABLE M

FINAL COST OF IN-PATIENT SERVICES AND PERCENTAGE INCREASE OVER PREVIOUS YEAR, BY PROVINCE
1958 to 1965

PROVINCE	1958		1959		1960		1961		1962	
	Final Cost	Percentage Increase	Final Cost	Percentage Increase	Final Cost	Percentage Increase	Final Cost	Percentage Increase	Final Cost	Percentage Increase
Nfld.	\$ 5,999,505.48	21.7	\$ 7,304,160.36	15.2	\$ 8,417,909.69	15.2	\$ 8,912,638.46	5.9	\$ 10,036,939.85	12.6
P.E.I.	*1,507,266.00	5.0	1,582,861.00	23.9	1,961,669.26	23.9	2,381,866.48	21.4	2,611,862.11	9.7
N.S.	*11,950,175.00	20.5	14,402,853.40	20.5	17,668,032.81	22.7	20,289,660.23	14.8	22,169,262.33	9.3
N.B.	*9,403,103.00	31.7	12,383,380.45	31.7	16,269,527.62	31.4	19,306,832.90	18.7	21,675,939.40	12.3
Que.	*85,924,996.00	8.6	*93,324,876.00	8.6	*108,680,320.00	16.5	141,446,468.31	30.1	171,103,659.31	21.0
Ont.	*126,839,227.00	27.9	162,184,056.06	27.9	192,471,252.07	18.7	216,933,851.00	12.7	245,201,158.25	13.0
Man.	19,620,464.00	24.1	24,342,268.00	24.1	27,649,032.00	13.6	30,525,227.07	10.4	33,113,476.00	8.5
Sask.	28,366,242.83	10.0	31,214,755.68	10.0	33,904,161.33	8.6	35,763,267.00	5.5	37,901,226.61	6.0
Alta.	30,537,627.70	16.4	35,541,554.53	16.4	41,856,736.05	17.8	46,229,813.13	10.4	51,316,218.56	11.0
B.C.	38,650,193.85	14.1	44,114,706.55	14.1	50,591,381.71	14.7	55,367,981.20	9.4	59,198,034.52	6.9
Yukon	*418,696.00	-31.4	*287,346.00	310.2	623,352.55	310.2	696,724.90	11.8	778,901.05	11.8
N.W.T.					555,255.80		902,103.37	62.5	1,108,146.90	22.8
CANADA	359,217,496.86	18.8	426,682,818.03	17.3	500,648,650.89	17.3	578,756,434.05	15.6	656,214,824.89	13.4

* Estimated for non-participating provinces.

TABLE M

FINAL COST OF IN-PATIENT SERVICES AND PERCENTAGE INCREASE OVER PREVIOUS YEAR, BY PROVINCE
1958 to 1965

	1963		1964		1965	
	Final Cost	Percentage Increase	Final Cost	Percentage Increase	Final Cost	Percentage Increase
Nfld.	\$ 11,593,679.79	15.5	\$ 15,122,467.25	30.4	\$ 19,671,851.82	30.1
P.E.I.	2,794,633.27	7.0	3,115,748.40	11.5	3,329,897.29	6.9
N.S.	24,543,125.50	10.7	27,381,937.96	11.6	30,074,794.06	9.8
N.B.	23,307,248.04	7.5	25,929,875.63	11.3	27,276,866.91	5.2
Que.	203,980,113.08	19.2	236,674,069.19	16.0	282,327,805.53	19.3
Ont.	273,300,237.00	11.5	305,658,845.00	11.8	339,976,782.00	11.2
Man.	36,358,862.00	9.8	38,540,518.00	6.0	42,153,081.13	9.4
Sask.	40,947,025.53	8.0	44,921,699.89	9.7	48,633,495.78	8.3
Alta.	57,204,320.90	11.5	64,203,777.93	12.2	67,546,720.76	5.2
B.C.	63,853,835.38	7.9	67,847,960.47	6.3	74,903,118.85	10.4
Yukon	645,443.58	-17.1	651,119.65	0.9	570,845.65	-12.3
N.W.T.	1,343,661.22	21.3	1,241,075.32	-7.6	1,570,537.21	26.5
CANADA	739,872,185.29	12.7	831,289,094.69	12.4	938,026,796.99	12.8

Resources Fund, Medical Care, the Canadian Council on Accreditation of Hospitals and the Post-Secondary Education Program served to inform the various provincial representatives in these areas.

At the Sixteenth Meeting of the Advisory Committee, held on November 14 and 15, 1967, reports concerning recommendations on non-depreciable equipment, on hospital construction costs, the Laboratory Units Program, revision of HS-1 and HS-2 forms, and the Hospital Services Study Unit were discussed at length. A review of the future use of sub-committees and their terms of reference was requested and it was suggested that the Federal Government should look at the structure of the sub-committees in order to improve the channels of communication between the provinces.

The Sub-Committee on Finance and Accounting met once during the year and in addition, working parties were convened on hospital morbidity statistics forms, on standardization of hospital terminology and job titles, and on medical and paramedical education in hospitals.

3. Activities of the Directorate of Hospital Insurance and Diagnostic Services

(a) Administration

The administrative responsibilities related to the Hospital Insurance and Diagnostic Services Program may be summarized as follows:

- 1) the processing of advance and final payments to the provinces under the Act;
- 2) the preparation of amending agreements with the provinces as required;
- 3) the classification of hospitals to determine their eligibility under the Act;
- 4) the production of informational material, such as reports and manuals, for use by governments and other agencies;
- 5) the evaluation of provincial hospital insurance plans in relation to national needs, and providing advice to the provinces in the development of their hospital insurance plans; and
- 6) the processing of claims submitted under the Hospital Insurance Supplementary Fund.

(b) Consultative Services

One of the major responsibilities of the Directorate has been to assist the provinces in elevating the standards of care and efficiency of the hospitals in Canada. To this end the Directorate has made available the services of consultants in Hospital Administration, Medical Administration, Nursing Administration, Accounting and Dietetics. The services of these consultants are available to federal Departments, to the Provinces and to hospitals through formal request of the various provincial departments of health or hospital commissions. During the last year, the consultants have carried out surveys in many hospitals across Canada with particular reference to the improvement of patient care services by making more effective the work of nurses through reallocation of some of their non-essential duties to other departments of the hospital.

Consultants have as well operated in such areas as assisting in the determination of the number of beds required in a community; specific budgetary problems in hospitals and the improvement of operational services in their various professional spheres of influence.

The consultants have participated on national committees and have given leadership in their respective fields through taking part in conventions, by giving major addresses, and in lecturing at various universities and to health associations.

The consultants have worked very closely with directors of hospital insurance programs in the provinces and their activities have been welcomed by the interested groups. During the year, at the request of international organizations and the World Health Organization, consultants have visited foreign countries to offer assistance and have as well lectured outside of Canada.

There is close liaison between the consultants and the members of the Hospital Services Study Unit in order to maintain a close relationship between the development of applied research projects and the present operating needs of the hospitals.

(c) Hospital Services Study Unit

The activities of the Hospital Services Study Unit fall into three main categories:

- 1) The provision of consulting services on request in connection with proposed or on-going applied research projects.

- 2) The encouragement and support, where indicated, of applied hospital research into high priority areas by a wide variety of individuals and agencies involved and interested in health care.
- 3) The carrying out by the Unit members themselves of intramural research projects after discussion with provincial authorities, universities, and other researchers in the field.

The Unit, during the year, consisted of three members representing the disciplines of nursing, sociology, and hospital administration/computer application. A physician joined the Unit in late March.

The first of a series of studies is nearing completion by the nursing consultant on ritualism in nursing, ritualism being defined here as the carrying out of routine tasks traditionally performed and apparently having importance for nurses, but whose relevance to the needs of today's operating situation is questionable.

Another intramural project is examining the effect of systems changes on the activities of nursing personnel with particular reference to their most effective utilization. For example, a change in the communication systems between ward clerk and nursing staff involved the introduction of electronic equipment.

A methodology for assessment of home care programs was developed by the Unit sociologist, after having visited many of the home care programs operating in Canada. This project has created a methodology to assist in the analysis of the cost effectiveness of home care programs.

The project concerned with computer assisted analysis of data to increase the efficiency of the decision making process through the correlation of social, economic and geographic factors has progressed on schedule. This project is concerned with the application of computer techniques to the analysis of hospital utilization by mapping. The primary data collection and computer programs are being finalized and first level analysis and displays have already assisted in master planning in certain regional areas. International inquiries and requests for information concerning this project have been received. It is recognized that this project has a longer development time than others and as a result progress reports are being made as development stages are reached.

There were many extramural studies to which members of the Unit gave advice and encouragement, the subject matter including

nurse staffing requirements based on patient classification, varying degrees of application of the computer to hospital systems, and non-medical factors associated with length of hospital stay.

The Unit's members were also involved in internal consultation on applied hospital research to other departmental staff. Many overseas visitors came to obtain information about applied hospital research in Canada and about the Unit's activities. Participation by Unit members in a variety of meetings and workshops of agencies involved in health and hospital care and research stimulated applied research in the health field and in particular research into hospital operations oriented to increase efficiency and cost effectiveness. Grants for applied research in hospitals were made available through the Public Health Research Grant funds at the federal level, and a growing core of researchers in this area is being developed.

(d) Hospital Insurance Supplementary Fund

In 1966-67, the Hospital Insurance Supplementary Fund was established for the payment of hospital insurance claims for residents of Canada, who, through no fault of their own, ceased to be eligible for and entitled to insured services under the Hospital Insurance Agreements and thus found themselves personally liable for payment of hospital accounts for insured services. The Fund is built up from per capita contributions from all provinces and these contributions are matched by the Federal Government. Since the inception of the program, 105 claims had been received of which 49 had been approved, 36 were rejected and 20 claims remained to be processed at the end of the year under review.

PART II

This part of the report describes and analyses the statistics on hospitals and the care they provide. It deals with types of hospitals and their services to patients, number of beds, expenditures, and personnel, and with certain other facilities. It also contains information on sex, age, and diagnosis of hospital patients.

The report deals with three classes of hospital: (1) hospitals whose budgets are subject to approval by the government of the province (budget review hospitals); (2) private hospitals, which contract with a provincial government to accommodate patients that are insured under the provincial plan (contract hospitals) and (3) hospitals of the Government of Canada. All send their data to the provincial governments, which edit and process the data and send them to the Department of National Health and Welfare.

At the end of 1966, there were 1,296 hospitals and 48 other facilities listed in the hospital-insurance agreements. There were also five hospitals that were deleted from the list during the year, the patient-days of four of which have been included in the report. Of the 1,296 hospitals that were listed at the end of 1966, three were contract hospitals in the U. S. A. near the Canadian border; their data are excluded from the tables. The 48 other facilities were clinics, laboratories, physical-restoration centres, medical centres, radiological facilities, and Red Cross blood depots. Twelve hospitals, with 285 beds altogether, did not report* (Tables 1, A1).

1. Utilization of Hospital Care

(a) Days of Care

In this report there are two measures of the rate of utilization of hospital care.

The first is a specific rate for insured hospital care. It is based on the number of days spent by patients in hospitals of their province of residence, and paid for by the provincial plan. This number is then divided by the number of people in the "insured population". This "insured population" is calculated according to the Hospital Insurance and Diagnostic Services Act for each year; it is based on a population estimate by the Dominion Statistician. Once this figure has been obtained, it is not retroactively revised when a later Census of Canada becomes available. This specific rate for 1966 ranged from 1,384 in Newfoundland to 2,247 in Saskatchewan. Differences between the provinces in age composition of the population, in the provision of insured hospital care for chronic disorders, and in bed supply account partially for this variability.

* Quebec 1 (120 beds), Ontario 5 (47 beds), Manitoba 1 (4 beds), Saskatchewan 2 (27 beds), Alberta 1 (75 beds), N. W. T. 2 (12 beds).

TABLE 1

NUMBER OF HOSPITALS AND OTHER FACILITIES LISTED IN HOSPITAL INSURANCE
AGREEMENTS AND REPORTING, CANADA, 1961-66

Year	Number of Hospitals Listed	Number of Other Facilities	Number of Hospitals Reporting
1961	1,340	26	1,311
1962	1,305	33	1,282
1963	1,291	35	1,291
1964	1,313	34	1,295
1965	1,290	47	1,277
1966	1,293	48	1,281 ¹

¹ The 12 hospitals that did not submit annual returns had about 285 beds. Reasons for non-report include not being in operation, not providing patient services and not having sufficient staff to complete the forms; all 12 remain on the lists in the agreements.

Source: Table A1 and annual reports.

TABLE 2

INSURED PATIENT-DAYS¹ EXCLUDING NEWBORN IN HOSPITALS LISTED IN HOSPITAL INSURANCE AGREEMENTS,
CANADA AND PROVINCES, 1961-1966.

PROVINCE	1961	1962	1963	1964	1965	1966
Newfoundland	536,918	558,682	588,959	647,959	695,012	681,111
Prince Edward Island	149,805	164,802	165,890	166,190	167,557	176,291
Nova Scotia	1,051,424	1,080,556	1,118,554	1,173,051	1,176,141	1,213,376
New Brunswick	976,537	1,003,107	1,031,860	1,066,984	1,079,196	1,091,314
Quebec	8,077,091	8,686,653	9,247,563	9,702,623	9,926,175	10,113,385
Ontario	11,141,030	11,664,504	12,099,892	12,542,986	12,861,580	13,060,038
Manitoba	1,613,598	1,705,350	1,750,677	1,794,648	1,767,170	1,782,796
Saskatchewan	1,997,712	1,965,028	2,091,295	2,135,453	2,136,074	2,124,079
Alberta	2,944,358	3,084,441	3,116,612	3,140,045	3,105,432	3,154,024
British Columbia	2,707,098	2,752,392	2,808,885	2,850,357	2,941,211	3,309,140
Yukon	24,871	27,836	20,126	18,334	20,649	21,642
Northwest Territories	27,402	31,811	42,596	41,676	38,340	37,232
CANADA	31,247,844	32,725,162	34,082,909	35,280,306	35,914,537	36,764,428

¹ Excludes out-of-province insured hospital care.

Source: Table A 2 and annual reports.

TABLE 3

INSURED POPULATION,¹ CANADA AND PROVINCES, 1961-1966

PROVINCE	1961	1962	1963	1964	1965	1966
Newfoundland	456,265	468,000	479,000	490,000	497,000	492,157
Prince Edward Island	86,979	91,664	105,000	106,000	106,000	106,891
Nova Scotia	716,552	724,000	734,000	739,000	742,000	737,811
New Brunswick	590,015	600,000	606,000	609,000	615,000	608,469
Quebec	5,240,328	5,346,000	5,450,000	5,546,000	5,640,000	5,765,427
Ontario	5,890,547	6,085,068	6,264,138	6,435,772	6,607,195	6,801,675 ²
Manitoba	907,665	919,343	914,231	944,108	952,000	937,722 ²
Saskatchewan	890,678	894,956	914,774	932,909	941,868	945,291 ²
Alberta	1,320,844	1,358,000	1,393,000	1,420,000	1,440,000	1,453,242
British Columbia	1,615,707	1,645,000	1,681,000	1,724,000	1,775,000	1,860,846
Yukon	14,161	14,000	15,000	15,000	15,000	14,036
Northwest Territories	22,264	24,000	24,000	25,000	25,000	28,242
CANADA	17,752,005	18,170,031	18,580,143	18,986,789	19,356,063	19,751,809 ²

¹ Average number of insured persons under provincial plans approved for purposes of payment of shareable costs.² Preliminary estimates.

Source: Ontario, Manitoba, and Saskatchewan: provincial plan administrations; elsewhere: certification by Dominion Statistician, under the Hospital Insurance and Diagnostic Services Act.

TABLE 4

INSURED PATIENT-DAYS EXCLUDING NEWBORN IN HOSPITALS LISTED IN HOSPITAL INSURANCE AGREEMENTS, RATE PER 1,000 INSURED POPULATION AND INDEX NUMBERS, CANADA AND PROVINCES, 1961-1966

PROVINCE	Insured Patient-Days per 1,000 Insured Population						Index Numbers of Insured Patient-Days per 1,000 Insured Population					
	1961	1962	1963	1964	1965	1966	1961	1962	1963	1964	1965	1966
Newfoundland	1,177	1,194	1,230	1,322	1,398	1,384	100.0	101.4	104.5	112.4	118.8	117.6
Prince Edward Island	1,722	1,798	1,580	1,568	1,581	1,649	100.0	104.4	91.7	91.0	91.8	95.8
Nova Scotia	1,467	1,492	1,524	1,587	1,585	1,645	100.0	101.7	103.9	108.2	108.0	112.1
New Brunswick	1,655	1,672	1,703	1,752	1,755	1,794	100.0	101.0	102.9	105.9	106.0	108.4
Quebec	1,541	1,625	1,697	1,749	1,760	1,754	100.0	105.4	110.1	113.5	114.2	113.8
Ontario	1,891	1,917	1,932	1,949	1,947	1,920	100.0	101.4	102.1	103.0	102.9	101.5
Manitoba	1,778	1,855	1,915	1,901	1,856	1,901	100.0	104.3	107.7	106.9	104.4	106.9
Saskatchewan	2,243	2,196	2,286	2,289	2,268	2,247	100.0	97.9	101.9	102.1	101.1	100.2
Alberta	2,229	2,271	2,237	2,211	2,157	2,170	100.0	101.9	100.4	99.2	96.7	97.4
British Columbia	1,675	1,673	1,671	1,653	1,657	1,778	100.0	99.9	99.7	98.7	98.9	106.1
Yukon	1,756	1,988	1,342	1,222	1,377	1,542	100.0	113.2	76.4	69.6	78.4	87.8
Northwest Territories	1,231	1,325	1,775	1,667	1,534	1,318	100.0	107.7	144.2	135.4	124.6	107.1
CANADA	1,760	1,801	1,834	1,858	1,855	1,861	100.0	102.3	104.2	105.6	105.4	105.7

Source: Tables 2 and 3.

The second is the general rate, i. e., of days spent by patients in hospitals that are listed in the dominion-provincial Agreements (i. e., excluding tuberculosis sanatoria and psychiatric institutions) divided by the number of people in the general population. The population estimates for each year are based on the latest census. When new census data become available the population estimates for the preceding years are revised and these revised estimates are then used to calculate the general rates (Tables 5, A4).

There is a high positive correlation between the general rates of utilization and the ratio of beds to population (Table 11). The rank of the provinces according to utilization (days in hospital per 1,000 population) differs very little from their rank according to the bed: population ratio, e. g., Saskatchewan recorded (per 1,000 population) the highest number of beds and the second highest number of patient-days, Ontario ranked fourth in beds and third in patient-days, and Newfoundland ranked ninth in beds and tenth in patient-days.

Table 5 shows the distribution of all patient-days (excluding the newborn) according to the person or agency that is responsible for payment. The provincial-plan days (92 per cent of the total) exclude those where the patients were insured by the province of their former residence; such days are shown under non-residents of province, together with days for patients who are residents of a foreign country. Insured residents, care not responsibility of provincial plan shows the days that were directly charged to the patients because their hospital stay was not approved for payment by the Plan. These were 1.0 per cent of the total patient-days in 1966, 37 per cent more than in the preceding year. Under uninsured residents of province are days which were directly charged to a patient who is a resident of the province in which the hospital lies or to a municipality on the patient's behalf. Under Workmen's Compensation Board and Government of Canada all patient-days which the hospital charges to these agencies are shown, regardless of the patient's residence or his insurance status.

From 1961 to 1966 the number of patient-days increased by 12.6 per cent, or by 2.4 per cent per year on the average. Budget review hospitals accounted for 88 per cent of all patient-days in 1966, contract hospitals for 5 per cent, and the hospitals of the Government of Canada for 7 per cent. These proportions have remained almost unchanged since 1961.

Table 6 shows the distribution of patient-days by type of accommodation. In budget review hospitals, the proportion of standard-ward accommodation had been 68 per cent from 1961 to 1965 and rose to 69 per cent in 1966. In contract hospitals the proportion of days in standard-wards declined from 68 per cent in 1961 to 49 per cent in 1966. Hospitals of the Government of Canada do not offer preferred accommodation.

TABLE 5

PATIENT-DAYS EXCLUDING NEWBORN IN HOSPITALS LISTED IN HOSPITAL INSURANCE AGREEMENTS, NUMBER AND RATES PER 1,000 POPULATION, AND NUMBER AND PERCENTAGE OF PATIENT-DAYS BY RESPONSIBILITY FOR PAYMENT, CANADA, 1961-1966

Responsibility for Payment	Number						Per Cent					
	1961	1962	1963	1964	1965	1966	1961	1962	1963	1964	1965	1966
Provincial plan ¹	31,247,844	32,725,162	34,082,909	35,280,306	35,914,537	36,764,428	87.8	89.2	90.1	90.8	90.7	91.7
Insured residents, care not responsibility of provincial plan	145,998	288,042	228,188	195,475	294,587	402,824	0.4	0.8	0.6	0.5	0.7	1.0
Uninsured residents of province	301,748	237,529	222,493	193,149	201,197	191,482	0.8	0.6	0.6	0.5	0.5	0.5
Non-residents of province ²	472,450	530,364	555,794	592,867	623,864	627,650	1.3	1.4	1.5	1.5	1.6	1.5
Workmen's Compensation Board	584,703	577,328	577,253	621,205	635,920	634,837	1.6	1.6	1.5	1.6	1.6	1.6
Government of Canada	2,226,079	1,951,432	1,885,415	1,865,214	1,929,401	1,480,350	6.3	5.3	5.0	4.8	4.9	3.7
Undistributed patient-days	620,495	392,754	275,363	125,226	—	—	1.7	1.1	0.7	0.3	—	—
Total	35,599,317	36,702,611	37,827,415	38,873,442	39,599,506	40,101,571	100.0	100.0	100.0	100.0	100.0	100.0
Rate per 1,000 population ³	1,952	1,975	1,998	2,015	2,016	2,004	xx	xx	xx	xx	xx	xx

¹ Patient-days charged to the provincial hospital insurance plan of the province in which the hospital is located.

² Patient-days charged directly to a non-resident of the province in which the hospital is located, or to the provincial plan of another province.

³ Based on the Census of Canada, 1961 and 1966, and population estimates of the Dominion Bureau of Statistics as on June 1st.

Source: Tables A 2 and A 3.

TABLE 6

PATIENT-DAYS EXCLUDING NEWBORN IN HOSPITALS LISTED IN HOSPITAL INSURANCE AGREEMENTS, BY STATUS OF HOSPITAL AND TYPE OF ACCOMMODATION¹ AND PERCENTAGE DISTRIBUTION BY TYPE OF ACCOMMODATION, CANADA, 1961-66

Year	Budget Review		Contract		Government of Canada		Total	
	Number	Percent	Number	Percent	Number	Percent	Number	Percent
Standard Ward								
1961	20,686,869	68.1	1,379,903	67.5	2,951,479	100.0	25,018,251	70.7
1962	21,458,461	68.1	1,237,814	62.1	3,128,410	100.0	25,824,685	70.2
1963	22,100,186	67.7	1,241,812	58.1	3,048,255	100.0	26,390,253	69.7
1964	22,935,218	67.8	1,080,303	53.1	2,996,115	100.0	27,011,636	69.3
1965	23,613,568	67.8	981,540	52.3	2,915,346	100.0	27,510,454	69.5
1966	24,462,517	68.9	920,162	48.8	2,714,316	100.0	28,096,995	70.1
Private and Semiprivate Rooms								
1961	9,687,562	31.9	662,974	32.5	*	*	10,350,536	29.3
1962	10,047,633	31.9	755,312	37.9	*	*	10,802,945	29.8
1963	10,540,197	32.3	896,965	41.9	*	*	11,437,162	30.3
1964	10,907,082	32.2	954,724	46.9	*	*	11,861,806	30.7
1965	11,195,005	32.2	894,047	47.7	*	*	12,089,052	30.5
1966	11,039,692	31.1	964,884	51.2	*	*	12,004,576	29.9
Total								
1961	30,374,431	100.0	2,042,877	100.0	2,951,479	100.0	35,368,787	100.0
1962	31,506,094	100.0	1,993,126	100.0	3,128,410	100.0	36,627,630	100.0
1963	32,640,383	100.0	2,138,777	100.0	3,048,255	100.0	37,827,415	100.0
1964	33,842,300	100.0	2,035,027	100.0	2,996,115	100.0	38,873,442	100.0
1965	34,808,573	100.0	1,875,587	100.0	2,915,346	100.0	39,599,506	100.0
1966	35,502,209	100.0	1,885,046	100.0	2,714,316	100.0	40,101,571	100.0

* Not applicable

¹ Excludes patient-days in 1961 and 1962 for which the type of accommodation was not stated.

(b) Admissions

The population rate of admissions to hospitals for Canada rose from 158 per thousand in 1961 to 162 in 1964 and declined to 159 in 1966. Provincial rates for Quebec and Ontario rose from 1961 until 1964, and those for British Columbia from 1961 to 1963, and then declined. The other provinces, which altogether contain but one quarter of the population, do not show the same trend: in Newfoundland and Prince Edward Island, the rate increased every year since 1961 and in Nova Scotia since 1962, whereas the other provinces and the territories do not exhibit a regular pattern (Table 7).

In 1966 the highest admission rate was recorded in Saskatchewan and the lowest in Newfoundland. Generally, admission rates for New Brunswick and the four western provinces were higher and those for the other provinces lower than the admission rate for Canada as a whole.

(c) Length of hospital stay

The average length of hospital stay⁽¹⁾ was 12.4 days for 1966, having been constant since 1963. In budget review general hospitals the average stay, 10.1 days in 1966, has been virtually unchanged since 1961. In hospitals of the Government of Canada and in budget review convalescent hospitals average stay was shorter in 1966 than in 1965, while in contract hospitals and budget review chronic hospitals it was longer (Table 8).

Table 9 deals only with budget review general hospitals, and permits interprovincial comparisons. Hospital stay was longest in central and eastern Canada, from 11.0 days in Ontario to 9.9 days in Prince Edward Island. Averages in the four western provinces ranged from 9.4 in Saskatchewan to 8.8 days in Alberta, and the territories had even shorter average stays. The variation does not mean that comparable in-hospital treatment involves longer stay in some provinces than in others. Many factors are involved, for instance: that provinces differ in the proportion of long-stay hospital care as between general and special hospitals; that provinces vary in their provision of certain specialized treatment facilities; that obstetrical patients, whose average stay is generally shorter than

(1) The tables show this average (computed by dividing the number of days that all those patients who left hospital in a particular year had spent there, since their admission, by the number of such patients) and also the quotient of the number of days that all patients spent in hospital during a particular year, and the number of patients that left during the year. Only the average is dealt with in the text and the graph.

TABLE 7

ADMISSIONS TO HOSPITALS LISTED IN HOSPITAL INSURANCE AGREEMENTS, NUMBER AND
RATES PER 1,000 POPULATION
CANADA AND PROVINCES, 1961-1966

PROVINCE	Number						Rate per 1,000 population					
	1961	1962	1963	1964	1965	1966	1961	1962	1963	1964	1965	1966
Newfoundland	50,915	54,451	56,352	58,835	64,716	65,427	111.2	116.3	118.4	121.8	132.6	132.6
Prince Edward Island	16,225	16,905	17,099	17,372	17,704	18,136	155.1	158.0	158.3	159.4	162.4	167.1
Nova Scotia	109,270	110,163	111,204	114,036	114,723	117,939	148.3	147.7	148.1	151.0	151.7	156.0
New Brunswick	104,333	104,635	105,950	108,213	108,629	107,297	174.5	173.0	174.0	177.1	176.6	174.0
Quebec	725,535	747,654	771,123	788,590	797,342	792,920	138.0	139.2	140.7	141.2	140.3	137.2
Ontario	949,771	970,460	1,009,102	1,040,030	1,050,890	1,064,236	152.3	152.8	155.7	156.8	154.8	152.9
Manitoba	165,555	170,534	175,689	176,113	171,497	174,979	179.6	182.2	185.1	183.6	177.7	181.7
Saskatchewan	199,448	195,942	211,275	211,495	211,814	211,495	215.6	210.7	226.4	224.5	223.0	221.4
Alberta	261,617	268,952	273,778	283,880	287,319	292,758	196.4	196.5	195.1	198.7	198.1	200.1
British Columbia	285,835	292,067	301,119	307,190	316,517	329,311	175.5	175.9	177.2	176.0	176.1	175.8
Yukon	3,491	3,643	3,296	2,931	2,813	2,963	238.7	242.9	219.7	195.4	200.9	206.0
Northwest Territories	4,554	6,003	6,775	6,533	6,561	7,072	198.0	240.1	260.6	242.0	243.0	246.1
CANADA	2,876,549	2,941,409	3,042,762	3,115,218	3,150,525	3,184,533	157.7	158.3	160.7	161.5	160.4	159.1

TABLE 8

AVERAGE LENGTH OF STAY EXCLUDING NEWBORN IN HOSPITALS LISTED IN HOSPITAL INSURANCE AGREEMENTS,
BY STATUS AND TYPE OF HOSPITAL, CANADA, 1961-1966

Year	Budget Review General	Budget Review Chronic	Budget Review Convalescent	Other Budget Review	All Budget Review	Contracts	Government of Canada	Total
Patient-days since admission divided by number of separations								
1961	10.0	231.8	42.1	18.5	11.0	15.2	35.4	11.7
1962	10.1	207.5	41.1	19.1	11.3	17.0	34.9	12.2
1963	10.1	219.5	40.9	22.4	11.4	18.0	39.5	12.4
1964	10.2	185.5	41.6	14.4	11.5	16.2	39.6	12.4
1965	10.2	197.9	43.4	17.1	11.5	18.7	41.1	12.4
1966	10.1	221.4	42.5	16.8	11.7	20.1	38.8	12.4
Patient-days during year divided by number of separations								
1961	10.1	287.9	40.8	19.5	11.3	18.5	38.2	12.2
1962	10.1	220.6	40.9	20.3	11.3	18.3	34.6	12.3
1963	10.1	216.5	40.9	21.7	11.4	18.8	36.7	12.3
1964	10.2	188.0	41.6	14.6	11.5	19.8	37.1	12.4
1965	10.2	217.8	44.4	17.6	11.6	22.5	37.2	12.6
1966	10.2	219.8	43.3	17.3	11.7	23.3	36.5	12.5

Source: Table A7 and annual reports.

TABLE 9

AVERAGE LENGTH OF STAY EXCLUDING NEWBORN IN BUDGET REVIEW GENERAL HOSPITALS,
CANADA AND PROVINCES, 1961-1966

PROVINCE	Patient-Days since Admission Divided by Number of Separations						Patient-Days during Year Divided by Number of Separations					
	1961	1962	1963	1964	1965	1966	1961	1962	1963	1964	1965	1966
Newfoundland	11.4	12.9	13.4	13.4	11.0	10.7	11.4	10.8	11.2	11.7	11.2	10.7
Prince Edward Island	9.9	9.8	9.9	9.5	9.8	9.9	9.8	10.0	9.8	9.7	9.5	9.8
Nova Scotia	9.8	10.1	10.3	10.6	10.6	10.6	9.9	10.1	10.4	10.6	10.5	10.6
New Brunswick	9.4	9.8	10.1	9.9	10.0	10.2	9.8	10.0	10.1	9.9	10.0	10.2
Quebec	10.4	10.3	10.3	10.3	10.3	10.2	10.5	10.5	10.3	10.4	10.4	10.3
Ontario	10.4	10.7	10.7	10.8	10.9	11.0	10.5	10.7	10.8	10.9	10.9	11.1
Manitoba	8.9	9.0	8.8	9.1	9.3	9.1	8.9	9.0	9.0	9.1	9.3	9.1
Saskatchewan	9.7	9.6	9.5	9.5	9.5	9.4	9.7	9.6	9.5	9.5	9.5	9.5
Alberta	9.0	9.2	9.0	8.9	8.9	8.8	9.0	9.1	8.9	8.9	8.9	8.8
British Columbia	9.7	9.5	9.5	9.4	9.3	9.3	9.6	9.5	9.5	9.4	9.3	9.4
Yukon	8.5	9.5	7.7	6.6	5.9	6.0	9.2	8.5	7.7	6.6	5.8	5.9
Northwest Territories	6.7	6.6	8.5	8.1	7.2	6.8	6.8	6.7	8.7	7.7	7.4	6.8
CANADA	10.0	10.1	10.1	10.2	10.2	10.1	10.1	10.1	10.1	10.2	10.2	10.2

Source: Table A7 and annual reports.

the average for all patients, constitute a varying proportion of the patient load; that the pattern of hospital morbidity is not uniform; that there are differences in the age composition of the population; and that there are environmental differences between provinces, particularly with respect to urbanization. Transportation difficulties, especially in sparsely populated regions, tend to prolong hospital stay in some provinces more than in others.

The average length of stay of hospital patients correlates closely with the size of hospital (Table A9 and Graph 1). For the group of hospitals with under 50 beds, the average was 8 days; it increases fairly regularly with the size of hospital up to 13 days for the largest hospitals. The larger the hospital, the more likely it will have facilities for treatment of certain conditions which require longer stay in hospital.

Closely related to the length of hospital stay is the turnover of patients, i. e., the frequency with which a hospital bed receives a new occupant. Graph 2 shows that a hospital bed accommodates on the average between 22 and 32 patients per year. The turnover in the smaller hospitals is greater because the length of stay is shorter.

2. Beds and Occupancy

(a) Beds

The number of beds in hospitals that were listed in hospital-insurance agreements at the end of 1966 for Canada was 136,987; this is 2,368 or 1.8 per cent more than a year before. The number of beds that are designated as general increased by 1,259 (1.6 per cent), chronic-and-convalescent beds by 607 (2.5 per cent), and psychiatric beds by 373 (2.2 per cent), while the number of obstetric beds was 137 (1.0 per cent) less than at the end of 1965. Except for Alberta, where the bed-to-population ratio increased from 8.3 to 8.8 per 1,000, the bed supply relative to population remained virtually constant.

Beds are classified according to the unit to which they are assigned by the hospital. Since some smaller hospitals do not differentiate their beds but designate all beds as "General", the distribution of beds by type in Table 13 corresponds only approximately to the diagnosis of the patients. Many patients admitted for the treatment of chronic conditions, for example, occupy "General" beds, which would not be counted as "chronic".

(b) Occupancy

Occupancy, a measure of density, is the ratio of the average number of patients to the number of available beds, expressed as a percentage.

TABLE 10

SEPARATIONS AND PATIENT-DAYS EXCLUDING NEWBORN SINCE ADMISSION BY
LENGTH OF STAY, NUMBER AND PERCENTAGE DISTRIBUTION¹ FOR
PATIENTS INSURED UNDER PROVINCIAL PLANS, CANADA¹, 1966.

Length of Stay (in days)	Number		Per Cent	
	Separations	Patient-Days since Admission	Separations	Patient-Days since Admission
1	257,485	257,504 ²	8.5	0.7
2	329,142	658,461 ²	10.8	1.8
3	233,283	700,128 ²	7.7	1.9
4 - 6	756,514	3,783,717	24.9	10.3
7 - 10	578,088	4,771,965	19.0	12.9
11 - 14	300,267	3,704,728	9.9	10.0
15 - 29	393,909	7,942,864	13.0	21.5
30 - 59	139,040	5,552,567	4.6	15.0
60 +	53,338	9,541,228	1.8	25.8
TOTAL	3,041,066	36,913,162	100.0	100.0

¹ Excludes Nova Scotia. See footnotes, Table A 22, for details regarding specific data excluded or included, by province. In Table 10, as distinct from Table A 22, Prince Edward Island included Plan data only.

² The discrepancies between the number of separations with one, two or three days since admission and the corresponding number of patient-days occur in the data as submitted by the provinces.

Source: Data supplied to the Department by provincial hospital insurance authorities.

TABLE 11

BEDS IN HOSPITALS LISTED IN HOSPITAL INSURANCE AGREEMENTS, NUMBER AND RATIO PER 1,000 POPULATION,
CANADA AND PROVINCES, 1961-1966

PROVINCE	Number						Beds per 1,000 Population					
	1961	1962	1963	1964	1965	1966	1961	1962	1963	1964	1965	1966
Newfoundland	1,982	2,152	2,403	2,542	2,867	2,978	4.3	4.6	5.0	5.3	5.9	6.0
Prince Edward Island	651	674	629	628	629	626	6.2	6.3	5.8	5.8	5.8	5.8
Nova Scotia	4,138	4,241	4,469	4,537	4,749	4,838	5.6	5.7	5.9	6.0	6.3	6.4
New Brunswick	3,709	3,861	4,008	4,131	4,049	4,034	6.2	6.4	6.6	6.8	6.6	6.5
Quebec	32,338	32,816	33,823	34,469	35,862	36,581	6.1	6.1	6.2	6.2	6.3	6.3
Ontario	41,389	43,035	44,965	46,390	46,741	47,243	6.6	6.8	6.9	7.0	6.9	6.8
Manitoba	6,685	6,970	6,951	6,992	7,004	6,999	7.3	7.4	7.3	7.3	7.3	7.3
Saskatchewan	7,578	7,573	7,769	7,937	7,929	7,795	8.2	8.1	8.3	8.4	8.3	8.2
Alberta	11,382	11,733	12,034	12,804	12,073	12,819	8.5	8.6	8.6	9.0	8.3	8.8
British Columbia	10,710	11,236	11,464	11,555	12,081	12,442	6.6	6.8	6.7	6.6	6.7	6.6
Yukon	157	160	161	152	160	160	10.7	10.7	10.7	10.1	11.4	11.1
Northwest Territories	327	432	482	486	475	472	14.2	17.3	18.5	18.0	17.6	16.4
CANADA	121,046	124,883	129,158	132,623	134,619	136,987	6.6	6.7	6.8	6.9	6.9	6.8

Source: Table A 10 and annual reports.

TABLE 12

BUDGET REVIEW GENERAL HOSPITALS BY SIZE OF HOSPITAL AND NUMBER
AND PERCENTAGE DISTRIBUTION OF BEDS, CANADA, 1961-1966

Size of Hospital (Rated Bed Capacity)										
Year	1-9	10-24	25-49	50-99	100-199	200-299	300-499	500-999	1,000 and over	Total
Number of Hospitals										
1961	56	217	196	134	124	45	40	27	6	845
1962	70	198	189	139	128	48	44	27	7	850
1963	66	197	191	142	131	49	46	32	7	861
1964	55	206	188	140	134	56	48	32	7	866
1965	49	211	187	145	129	60	52	30	8	871
1966	47	209	190	151	127	63	55	31	9	882 ¹
Number of Beds Set up										
1961	602	4,155	7,997	9,957	17,800	10,609	15,248	17,690	7,061	91,119
1962	784	3,854	7,166	10,232	18,259	11,308	16,674	17,493	8,178	93,948
1963	719	3,861	7,157	10,370	18,392	11,367	16,915	20,213	8,262	97,256
1964	522	3,953	7,035	10,225	18,807	13,242	17,555	20,531	8,374	100,244
1965	486	3,996	7,026	10,500	17,818	14,218	19,222	19,198	9,480	101,944
1966	459	3,926	7,021	10,883	17,211	14,961	20,160	20,265	10,830	105,716
Per Cent of Beds Set up										
1961	.7	4.6	8.8	10.9	19.5	11.6	16.7	19.4	7.7	100.0
1962	.8	4.1	7.6	10.9	19.4	12.0	17.7	18.6	8.7	100.0
1963	.7	4.0	7.4	10.7	18.9	11.7	17.4	20.8	8.5	100.0
1964	.5	3.9	7.0	10.2	18.8	13.2	17.5	20.5	8.4	100.0
1965	.5	3.9	6.9	10.3	17.5	13.9	18.9	18.8	9.3	100.0
1966	.4	3.7	6.6	10.3	16.3	14.2	19.1	19.2	10.2	100.0

¹ See footnote to Table A9.

Source: Tables A 11 and A 12 and annual reports.

TABLE 13

BEDS IN HOSPITALS LISTED IN HOSPITAL INSURANCE AGREEMENTS BY STATUS OF HOSPITAL AND NUMBER AND PERCENTAGE DISTRIBUTION BY TYPE OF UNIT, CANADA, 1966

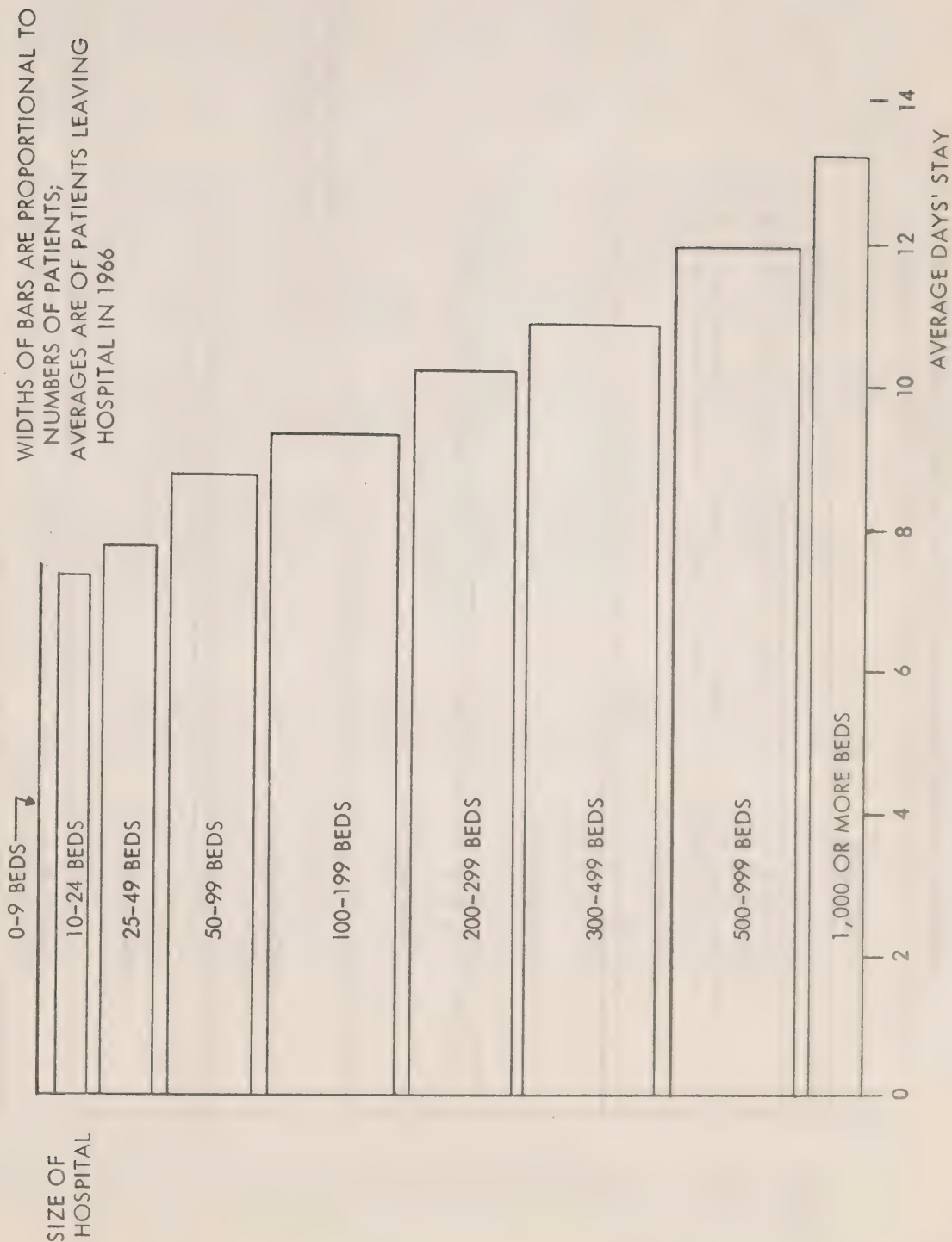
Type of Unit	Number				Per Cent			
	All Budget Review	Contract	Government of Canada	All Hospitals	All Budget Review	Contract	Government of Canada	All Hospitals
Acute Treatment:								
General	72,009	1,718	3,988	77,715	59.0	28.8	44.8	56.7
Obstetric	12,963	317	142	13,422	10.6	5.3	1.6	9.8
Paediatric	16,786	284	447	17,517	13.7	4.8	5.0	12.8
Psychiatric	2,219	1	1,294	3,514	1.8	*	14.5	2.6
Subtotal, Acute Treatment	103,977	2,320	5,871	112,168	85.1	38.9	66.0	81.9
Chronic and Convalescent	18,147	3,649	3,023	24,819	14.9	61.1	34.0	18.1
Total	122,124	5,969	8,894	136,987	100.0	100.0	100.0	100.0
Number of Hospitals Reporting	1,009	195	77	1,281	—	—	—	—

* Less than 0.05

Source: Tables A13 and A14.

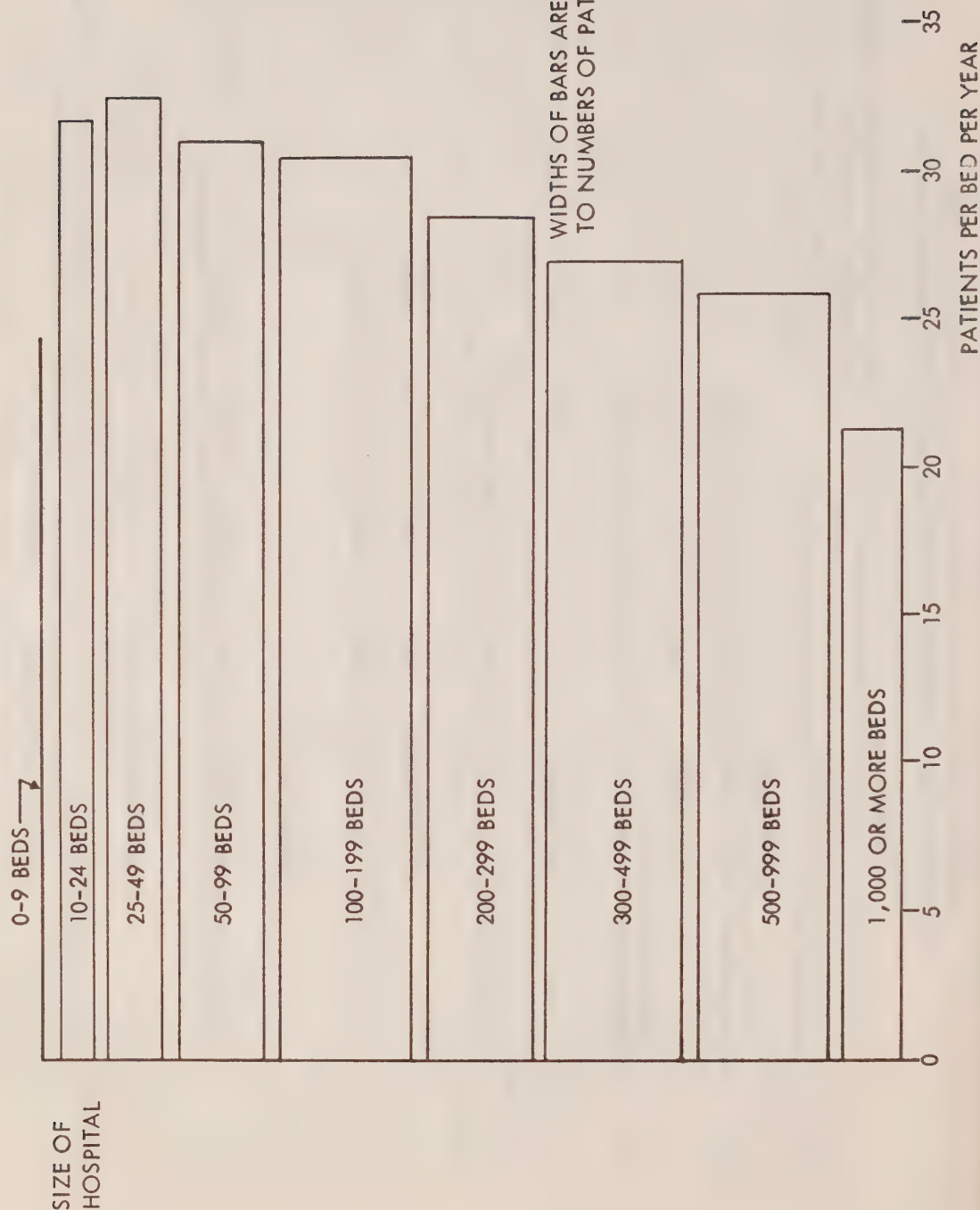
GRAPH 1

AVERAGE DAYS' STAY OF PATIENTS BY SIZE OF HOSPITAL, 1966
(PATIENTS EXCLUDE NEWBORN, HOSPITALS ARE BUDGET REVIEW GENERAL)



GRAPH 2

PATIENTS PER BED PER YEAR BY SIZE OF HOSPITAL, 1966
(PATIENTS EXCLUDE NEWBORN, HOSPITALS ARE BUDGET REVIEW GENERAL)



Over the period 1961 to 1966 occupancy of budget review hospitals remained between 81.0 and 81.4 per cent. In the hospitals of the Government of Canada, it ranged between 73.9 and 76.3 per cent. In contract hospitals it was 76 per cent in 1961, between 80 and 82 per cent during the period 1962 to 1965, and increased to 87 per cent in 1966, mainly on account of changes in Ontario (Table 14).

For budget review general hospitals occupancy was 80.3 per cent from 1961 to 1963, 80.5 per cent in 1964 and 1965, and 79.9 per cent in 1966. Calculated separately for each province the ratios varied between 72.7 per cent in Alberta to 82.7 per cent in British Columbia. It was much lower in the territories (Table 15). Occupancy of chronic hospitals was between 89 and 98 per cent, with an average of 93 per cent for Canada (Table A15).

Table A16 shows that in every province the occupancy, calculated as an average for each group of hospitals of a similar size, increases with the size of the hospitals.

Another aspect of occupancy is the average time interval between the discharge of one patient and the admission of the next (Graph 3). This varies from 7 days for the hospitals with less than 10 beds, and 4 days for those with 10 to 24 beds, to a little over 2 days for the largest hospitals.

(c) Newborn

Data on hospital care of the newborn are excluded from the tables on beds, admissions, separations, hospital stay, and diagnosis; they are shown separately in Tables 16 and A17.

In 1966, the number of newborn (separations from hospital) was 7.1 per cent less than in 1965, while the total number of children born in Canada was 7.4 per cent below that of 1965. The mean length of hospital stay had remained virtually constant at 6.7 days since 1963 for Canada; specific means for the provinces ranged from 5.9 days in Newfoundland to 7.2 days in Alberta and British Columbia*.

* The proportion of children that were born in hospital was 99.0 per cent in 1965 and 99.2 per cent in 1966 for Canada excluding Newfoundland.

TABLE 14

OCCUPANCY¹ IN HOSPITALS LISTED IN HOSPITAL INSURANCE
AGREEMENTS BY STATUS AND TYPE OF HOSPITAL, CANADA, 1961-1966

Status and Type of Hospital	1961	1962	1963	1964	1965	1966
	%	%	%	%	%	%
Budget review general	80.3	80.3	80.3	80.5	80.5	79.9
Budget review chronic	93.6	94.5	92.1	85.7	91.4	93.3
Budget review convalescent	84.7	83.6	80.9	88.6	82.4	86.9
Other budget review	77.7	75.0	78.3	75.3	71.6	71.4
All budget review	81.2	81.4	81.0	81.2	81.4	81.2
Contract	76.2	80.5	82.1	79.9	80.3	87.0
Government of Canada	75.4	75.8	73.9	75.8	76.3	75.8

¹The ratio of the average number of patients to the number of available beds.

Source: Table A15 and annual reports.

GRAPH 3

AVERAGE DAYS' VACANCY OF BEDS
BETWEEN SUCCESSIVE PATIENTS BY SIZE OF HOSPITAL, 1966
(PATIENTS EXCLUDE NEWBORN, HOSPITALS ARE BUDGET REVIEW GENERAL)

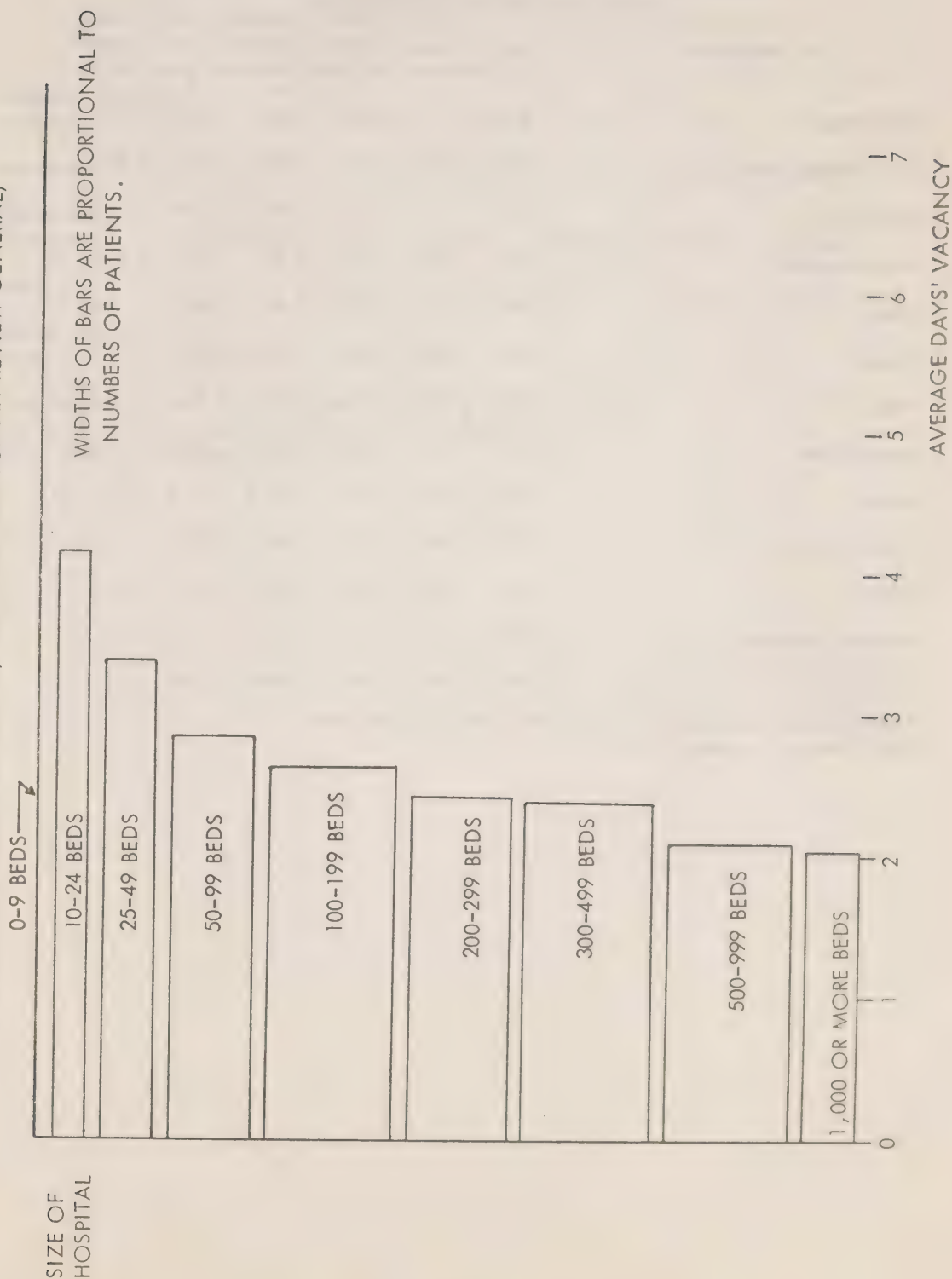


TABLE 15

OCCUPANCY¹ IN BUDGET REVIEW GENERAL HOSPITALS,
CANADA AND PROVINCES, 1961-1966

PROVINCE	1961	1962	1963	1964	1965	1966
	%	%	%	%	%	%
Newfoundland	81.2	77.3	74.6	79.8	78.0	76.5
Prince Edward Island	69.8	71.2	76.0	76.0	77.1	81.2
Nova Scotia	77.6	77.7	75.7	78.6	75.6	76.8
New Brunswick	84.3	81.5	80.9	80.1	81.4	81.9
Quebec	80.7	81.4	81.3	81.3	81.5	79.2
Ontario	82.3	82.3	82.3	82.5	82.9	82.6
Manitoba	77.4	78.2	78.4	79.9	78.5	79.3
Saskatchewan	76.0	74.5	77.8	76.5	75.9	76.8
Alberta	76.4	76.3	74.1	75.2	74.4	72.7
British Columbia	81.0	82.0	82.2	81.2	81.8	82.7
Yukon	41.7	41.2	39.2	32.6	30.0	34.8
Northwest Territories	44.2	41.5	61.7	49.5	55.5	66.3
CANADA	80.3	80.3	80.3	80.5	80.5	79.9

¹ The ratio of the average number of patients to the number of available beds.

Source: Table A15 and annual reports.

TABLE 16

NEWBORN IN HOSPITALS LISTED IN HOSPITAL INSURANCE AGREEMENTS:
HOSPITALS, BASSINETS, PATIENT-DAYS, SEPARATIONS, AND LENGTH OF STAY,
CANADA, 1961 - 1966

ITEM	1961	1962	1963	1964	1965	1966
Hospitals reporting bassinets	933 ¹	972	979	1,000	977	987
Bassinets	16,135	17,604	18,020	18,190	18,068	17,939
Patient-days during year	2,781,363	2,965,055	3,045,352	2,978,650	2,813,508	2,606,688
Separations	438,728	456,185	454,485	446,153	418,269	388,377
Average length of stay ²	6.3	6.5	6.7	6.7	6.7	6.7

¹ Many hospitals in Quebec did not report bassinets set up at December 31, 1961.

² Patient-days during the year divided by the number of separations.

Source: Table A 17 and annual reports.

3. Operating expenditures of budget review hospitals

The operating expenditures of budget review hospitals, excluding capital costs, amounted to 1,276 million dollars in 1966. These accounted for 89 per cent of all patient-days in hospitals that are listed under the Act (other hospitals do not report their expenditure). Their expenditures had risen by 15 per cent, from 1,109 million dollars in 1965. Of this increase, Quebec and Ontario accounted for 70 per cent. The averages of the five annual increases over the preceding year were: Canada 12.9 per cent; Quebec 17; Newfoundland 16; Alberta 13; Ontario 12; New Brunswick 9; and the other provinces 8 per cent (Table 17).

On the average, almost two-thirds were spent on salaries, 3 per cent on medical and surgical supplies, 4 per cent on drugs, 5 per cent on food, and 23 per cent on other items. For the Atlantic region the proportion of salaries was lower: 53 per cent in Newfoundland and 58 to 59 per cent in the other three provinces (Table A21).

Apart from rising prices, changes in the services that hospitals provide contributed to the increases in expenditures. From 1961 to 1966 the population of Canada grew by 10 per cent, and the number of patient-days by 13 per cent, so that not only more people went to hospital but patients also spent more time in hospitals in 1966 than in 1961. Moreover, there were qualitative changes in hospital care which are borne out by the increased number of paid hours of work per patient-day (6 per cent), as well as by the increase of expenditures per patient-day excluding salaries and food (i. e., that component which comprises medical supplies, drugs, and all other revenue-fund expenses). The increase of these expenses was 60 per cent over the five-year period, far more than what price inflation alone would account for.

When one compares the cost per patient-day in one year with that five years later, he is comparing the cost in dollars of dissimilar entities. For, whereas advance in manufacturing results in cheaper production of the standard product as well as in improvement of its quality, advance in medicine entails not only improvement in the quality of treatment but also the introduction of new methods and kinds of treatment that require much capital outlay and additional professional time. Any concomitant saving through simplification of procedure and other improvement in efficiency has a much smaller influence on the average cost of a patient-day of care.

Total cost per patient-day for Canada rose by 12.7 per cent from \$32.09 in 1965 to \$36.18 in 1966. It ranged from \$26.61 in Prince Edward Island to \$44.00 in Quebec. Quebec also shows the highest increase over 1965, 19 per cent. In all other provinces, the cost was below \$36.18, the mean for Canada.

TABLE 17
REVENUE FUND EXPENDITURES OF BUDGET REVIEW HOSPITALS,
CANADA AND PROVINCES, 1961-1966

PROVINCE	1961		1962		1963		1964		1965		1966	
	Amount	Per Cent increase over 1961	Amount	Per Cent increase over 1962	Amount	Per Cent increase over 1963	Amount	Per Cent increase over 1964	Amount	Per Cent increase over 1965	Amount	Per Cent increase over 1966
Newfoundland	\$ 10,503,086	15.9	\$ 12,170,769	14.0	\$ 13,871,005	14.0	\$ 16,510,131	19.0	\$ 20,561,720	24.5	\$ 23,222,399	12.9
Prince Edward Island	3,196,662	4.6	3,343,693	7.4	3,591,564	7.4	3,976,124	10.7	4,299,051	8.1	4,892,463	13.8
Nova Scotia	24,911,388	9.8	27,355,067	11.0	30,366,474	11.0	34,270,153	12.9	37,618,867	9.8	41,413,823	10.1
New Brunswick	23,752,195	9.8	26,084,877	11.2	28,998,366	11.2	31,220,584	7.7	32,891,908	5.4	35,728,696	8.6
Quebec	181,950,631	16.6	212,216,642	16.5	247,140,470	16.5	285,304,571	15.4	338,465,008	18.6	401,346,604	18.6
Ontario	258,880,912	13.0	292,542,269	11.4	325,987,569	11.4	362,682,132	11.3	401,415,050	10.7	457,042,861	13.9
Manitoba	35,744,290	9.1	38,992,907	10.1	42,915,730	10.1	45,201,540	5.3	49,387,202	9.3	55,787,458	12.9
Saskatchewan	40,063,624	5.4	42,216,251	9.0	46,029,533	9.0	50,803,179	10.4	54,825,116	7.9	60,189,556	9.8
Alberta	51,678,260	12.2	57,958,355	11.7	64,752,983	11.7	72,389,591	11.8	80,230,606	10.8	94,243,603	17.5
British Columbia	64,543,328	7.0	69,074,366	7.1	73,998,737	7.1	78,878,007	6.6	88,864,234	12.7	101,560,505	14.3
Yukon	165,771	9.0	180,728	- 3.1	175,085	- 3.1	155,875	-11.0	147,429	- 5.5	174,627	18.4
Northwest Territories	244,400	4.2	254,753	8.2	275,551	8.2	270,113	- 2.0	416,708	54.3	486,991	16.9
CANADA	695,634,547	12.5	782,390,677	12.2	876,103,067	12.2	981,662,000	11.8	1,109,122,899	13.0	1,276,089,586	15.1

Source: Table A 18 and annual reports.

Over the period 1961 to 1965 the average annual rise of the cost per patient-day was 9 per cent for Canada; 14 per cent in Quebec; 10 per cent in Newfoundland; 8 per cent in Nova Scotia, Ontario, Saskatchewan, and Alberta; and 6 to 7 per cent in the other provinces.

The items that contributed to the increase of the cost per patient-day of \$4.09 (from \$32.09 in 1965 to \$36.18 in 1966) were as follows: salaries \$2.83 (14 per cent); medical and surgical supplies 11¢ (11 per cent); drugs 10¢ (8 per cent); food 10¢ (6 per cent); and other expenses 95¢ (13 per cent); (Tables 18 and A19).

Dividing the expenditures of budget-review hospitals of a province by the population yields the cost of operating these hospitals per resident. Comparability of these figures from year to year or between provinces is somewhat limited because budget-review hospitals provided only part of these services - 86 per cent of the total patient-days in all listed hospitals in 1961 and 89 per cent in 1966 - and because this proportion varies between provinces from 85 per cent in British Columbia to 100 per cent in Prince Edward Island (1966 data). Moreover, differences between provinces reflect not only differences in the price of labour and in utilization, but also the varying proportion of geriatric and convalescent care provided in these hospitals.

In Newfoundland, the mean annual increase over the preceding year for the years 1962 to 1966 was highest, 17 per cent, while the cost per resident in 1966 was the second lowest among the provinces, \$47.07, which is \$16.69 below the average. In Quebec, the mean increase was 15 per cent, while the cost in 1966 was highest, \$69.43, which is \$5.67 above the average. In Alberta, the average increase from year to year was 11 per cent, in Nova Scotia and Ontario 10 per cent, in British Columbia 6 per cent, and in the other four provinces 8 per cent.

4. Characteristics of Patients

Information about the patients in hospitals comes from the provinces to this Department. Provinces differ in the class of patient that they include in the data they supply, but the difference probably does not significantly diminish the accuracy of the statistics. ⁽¹⁾

(a) Age and Sex

The young go into hospital less often, use relatively fewer days of care, and stay there for shorter periods, than the old. In 1966, for example, the fifteen to twenty-four year old went to hospital only

(1) The differences relate to care given outside the insuring province, to uninsured persons, and to persons from outside the province. Footnotes to the tables give particulars.

TABLE 18

REVENUE FUND EXPENDITURE OF BUDGET REVIEW HOSPITALS PER PATIENT-DAY,
EXCLUDING NEWBORN, CANADA AND PROVINCES, 1961-1966

PROVINCE	1961	1962	1963	1964	1965	1966
	\$	\$	\$	\$	\$	\$
Newfoundland	20.00	21.69	23.34	26.20	28.91	32.10
Prince Edward Island	19.04	18.80	20.46	22.65	24.41	26.61
Nova Scotia	23.66	25.37	27.36	29.36	32.06	34.01
New Brunswick	23.72	25.57	27.51	28.64	29.98	32.31
Quebec	22.63	25.58	28.84	32.32	36.95	44.00
Ontario	24.26	26.14	27.97	29.82	32.14	35.63
Manitoba	21.94	23.18	24.89	25.47	27.90	31.34
Saskatchewan	21.18	22.82	23.41	25.84	27.72	30.60
Alberta	20.42	21.65	23.28	24.45	26.08	30.04
British Columbia	23.85	25.50	26.42	27.98	30.55	31.80
Yukon	29.43	33.41	45.32	50.25	51.73	52.87
Northwest Territories	34.45	38.24	27.80	33.87	30.24	33.84
CANADA	23.01	25.03	27.06	29.23	32.09	36.18

Source: Table A19 and annual reports.

TABLE 19

REVENUE FUND EXPENDITURES OF BUDGET REVIEW HOSPITALS PER CAPITA¹,
CANADA AND PROVINCES, 1961- 1966

PROVINCE	1961	1962	1963	1964	1965	1966
	\$	\$	\$	\$	\$	\$
Newfoundland	22.94	26.00	29.14	34.18	42.13	47.07
Prince Edward Island	30.55	31.25	33.25	36.48	39.44	45.08
Nova Scotia	33.80	36.67	40.43	45.39	49.76	54.78
New Brunswick	39.72	43.11	47.62	51.10	53.48	57.93
Quebec	34.60	39.51	45.09	51.09	59.54	69.43
Ontario	41.51	46.06	50.30	54.69	59.13	65.66
Manitoba	38.78	41.66	45.22	47.13	51.18	57.93
Saskatchewan	43.30	45.39	49.33	53.93	57.71	63.00
Alberta	38.80	42.34	46.15	50.66	55.33	64.41
British Columbia	39.61	41.61	43.55	45.20	49.45	54.20
Yukon	11.33	12.05	11.67	10.39	10.53	12.14
Northwest Territories	10.63	10.19	10.60	10.00	15.43	16.94
CANADA	38.14	42.10	46.38	50.89	56.46	63.76

¹ Based on the Census of Canada, 1961 and 1966, and population estimates of the Dominion Bureau of Statistics as of June 1st.

Source: Table A 20 and annual reports.

half as often as the people sixty-five and over, and stayed there only a quarter as long, thereby using, on the average, only an eighth as many days of care. On the other hand, children below five used substantially more care than those from five to fourteen.

Over the 1961-1966 period Canadians tended to be in hospital increasingly often, although small reductions in the rate (of separations per year per 1,000 population; see first section of Table 20) occurred in 1963 and in 1965 and 1966. The reductions principally arose out of reductions in obstetrical cases, and appear in the table in the age classes fifteen to twenty-four and twenty-five to forty-four. Above and below these ages marked rises in the rate occurred, with the tabulated classes having rates in 1966 between 14 and 20 per cent above their levels in 1961.

Utilization of hospital care can be measured in terms of patient-days, one patient-day being the service rendered to an in-patient during one twenty-four hour period. The rate is calculated in terms of patient-days per 1,000 population (see second section of Table 20). Here the increase in the annual rate for all age groups combined, between 1961 and 1966, amounted to a rise of one sixth, or from 1,633 days to 1,905. A notable drop in this rate had occurred, however, in 1965, the rate then being 1,875, and the figure in 1966 was still lower than the 1,921 days recorded in 1964.

The 1965 rate-reduction had been reflected in every age-group but zero to four years, and further reductions occurred in 1966 in the fifteen to twenty-four and twenty-five to forty-four age brackets. The falling-off of utilization of hospital care in the fifteen to twenty-four group has been particularly marked; from a rate of 1,166 days in 1962 it was reduced to 1,032 in 1966.

Average insured days' stay in hospital (see third section of Table 20) had been increasing until 1964, when it reached 12.0. It declined slightly to 11.8 in 1965, but rose again to 12.1 days in 1966. Two age-groups accounted for the entire increase in 1966, the twenty-five to forty-four group rising by 0.1 day to 8.8 days and the over-sixty-four class by 0.6 day to 27.6 days. All other age groups had unaltered lengths of stay in 1966; in particular, those under twenty-five had not varied by as much as a tenth of a day since 1963.

Relationships in 1966 between statistics of hospital-use for males and those for females, set out in Table 21, were unchanged from those that had existed in 1965. Females went to hospital more often than males, but among persons below age fifteen and above age fifty-nine, males were admitted more frequently than females. Between age fifteen and age fifty-nine and after age seventy-four females spent relatively more time in hospital than males. On the other hand, once admitted to hospital, males stayed there longer than females at all ages except below five and after sixty-four.

TABLE 20

SEPARATIONS AND DAYS OF CARE SINCE ADMISSION PER 1,000 POPULATION, AND AVERAGE LENGTH OF STAY, BY AGE,
FOR PATIENTS INSURED BY PROVINCIAL PLANS, CANADA, 1961-1966⁽¹⁾

	0-4 (2)	5-14	15-24	25-44	45-64	65+	All Ages (2)
Separations per 1,000 population							
1961	150.9	83.1	165.2	169.4	143.8	254.0	150.0
1962	156.0	82.3	171.9	178.2	152.9	268.8	156.3
1963	155.2	81.3	166.8	176.3	155.8	276.1	155.7
1964	161.9	83.0	166.2	179.2	162.3	286.7	159.4
1965	166.3	82.2	158.3	173.3	165.8	295.0	158.3
1966 (1)	172.1	83.3	151.4	166.7	168.9	304.1	157.5
Days since admission per 1,000 population							
1961	1,218.9	497.5	1,106.1	1,380.5	2,100.0	6,317.6	1,633.3
1962	1,320.9	500.5	1,166.5	1,507.8	2,333.5	7,421.4	1,812.2
1963	1,286.6	484.2	1,128.2	1,485.2	2,382.7	7,695.8	1,821.5
1964	1,340.4	496.4	1,132.5	1,547.9	2,530.0	8,332.1	1,921.1
1965	1,387.3	493.0	1,080.8	1,507.0	2,497.3	7,967.4	1,875.4
1966	1,426.7	500.7	1,031.7	1,470.0	2,549.6	8,378.7	1,905.2
Average length of stay (3)							
1961	8.1	6.0	6.7	8.2	14.6	24.9	10.9
1962	8.5	6.1	6.8	8.5	15.3	27.6	11.6
1963	8.3	6.0	6.8	8.4	15.3	27.9	11.7
1964	8.3	6.0	6.8	8.6	15.6	29.0	12.0
1965	8.3	6.0	6.8	8.7	15.1	27.0	11.8
1966	8.3	6.0	6.8	8.8	15.1	27.6	12.1

(1) Data generally include all care given as insured benefits to persons other than newborn infants. For 1966, Nova Scotia and British Columbia exclude such care given outside the province; Saskatchewan excludes care given in its four geriatric hospitals; Newfoundland and Ontario include care given in their hospitals to persons who are not residents; Manitoba and Alberta include uninsured care provided in their hospitals to persons whom they insure; and Quebec includes all care given in its hospitals to anyone.

(2) Excludes newborn.

(3) Patient-days since admission divided by number of separations.

TABLE 21

SEPARATIONS AND DAYS OF CARE SINCE ADMISSION, NUMBER AND RATES PER 1,000 POPULATION AND AVERAGE LENGTH OF STAY
FOR PATIENTS INSURED BY PROVINCIAL PLANS, AND POPULATION OF CANADA BY SEX AND AGE, CANADA, 1966

	0-4(1)	5-14	15-24	25-44	45-59	60-64	65-74	75+	Age Unknown	All (4) Ages
Separations										
Male	217,573	198,562	125,095	223,367	218,383	72,615	130,101	109,249	1,308	1,296,253
Female	160,547	167,283	374,311	614,550	246,523	63,401	120,708	108,147	1,620	1,857,090
Total	378,120	365,845	499,406	837,917	464,906	136,016	250,809	217,396	2,928	3,153,343
Separations per 1,000 population										
Male	192.7	88.5	75.5	88.5	150.2	220.0	286.8	415.7	—	128.9
Female	150.2	77.8	227.8	245.6	171.2	190.2	238.9	340.3	—	186.4
Total	172.1	83.3	151.4	166.7	160.6	205.0	261.6	374.4	—	157.5
Patient-days since admission										
Male	1,784,279	1,228,890	1,024,642	2,367,449	3,159,918	1,290,447	2,779,850	3,119,633	15,958	16,771,066
Female	1,350,722	971,500	2,378,874	5,021,905	3,435,903	1,184,785	2,865,836	4,134,461	18,279	21,362,265
Total	3,135,001	2,200,390	3,403,516	7,389,354	6,595,821	2,475,232	5,645,686	7,254,094	34,237	38,133,331
Days since admission per 1,000 population										
Male	1,580.7	547.6	618.7	937.8	2,172.7	3,910.4	6,127.1	11,870.7	—	1,668.0
Female	1,264.0	451.8	1,447.9	2,007.0	2,385.9	3,553.6	5,672.7	13,009.6	—	2,144.7
Total	1,426.7	500.7	1,031.7	1,470.0	2,278.7	3,731.1	5,887.7	12,494.1	—	1,905.2
Average length of stay⁽²⁾										
Male	8.2	6.2	8.2	10.6	14.5	17.8	21.4	28.6	12.2	12.9
Female	8.4	5.8	6.4	8.2	13.9	18.7	23.7	38.2	11.3	11.5
Total	8.3	6.0	6.8	8.8	14.2	18.2	22.5	33.4	11.7	12.1
Population (in thousands)⁽³⁾										
Male	1,128.8	2,244.1	1,656.1	2,524.4	1,454.4	330.0	453.7	262.8	—	10,054.3
Female	1,068.6	2,150.3	1,643.0	2,502.2	1,440.1	333.4	505.2	317.8	—	9,960.5
Total	2,197.4	4,394.4	3,299.0	5,026.7	2,894.5	663.4	958.9	580.6	—	20,014.9

(1) Excludes newborn.

(2) Patient-days since admission divided by number of separations.

(3) Census of 1966, Dominion Bureau of Statistics.

(4) See footnotes, Table 20.

Source: Data supplied to Department by Provincial Plans.

(b) Diagnosis

The rank of the ten categories (other than certain residual categories) that ranked highest in terms of number of cases among the ninety-four tabulated categories⁽¹⁾ of the Canadian list of ninety-eight diagnoses was virtually unchanged in 1966, and in fact the four largest categories in 1966 had been the four largest in each of the preceding three years. Table 21 sets out the ranks over the four years from 1963 to 1966.

Twenty-six diagnostic classes recorded fewer separations in 1966 than in 1965. Among the largest reductions (percentages in parentheses) were poliomyelitis and encephalitis (15); infectious hepatitis (12); delivery without mention of complications (9); appendicitis and diseases of the thyroid gland (6 each); and certain diseases of early infancy (5). Diagnoses with large increases in 1966 included influenza (38); nephritis and nephrosis (21); malignant neoplasm of cervix uteri (18); internal injury of chest, abdomen and pelvis (12); delivery with specified complications and malignant neoplasm of large intestine except rectum (10 each). Table A22 shows the statistics for all ninety-four classes for 1966.

Some of the changes in frequency may have arisen from refinements or revisions of coding practices in the provinces. One province, Alberta, is known to have introduced in 1966 a more precise method of recording diagnosis; at least a portion of the apparently-anomalous increase in class 76 (delivery with specified complications) appears to be procedural, rather than indicative of a true shift in morbidity.

The average length of stay for individual diagnoses has remained quite constant between 1965 and 1966; figures for each diagnosis class for 1966 are also presented in Table A22. Only in sixteen classes did the change amount to a full day. The largest increases in 1966 over 1965 were in poliomyelitis and encephalitis (9 days) and in inflammatory and other diseases of central nervous system, and diseases of arteries (7 days each), while the largest reductions were in malignant neoplasm of rectum and in psychoses (3 days each).

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- (1) The four categories omitted from the tabulation are those composed of diagnostic cases, cases of examination only, live births, and stillbirths. An adjustment has been made for the one major statistical deviation that has been identified. This deviation arose from the fact that in Ontario in 1964, 1965, and 1966, cases of childbirth involving the use of forceps were included under "delivery with specified complications", instead of, as they should have been, under "delivery without mention of complications". The data have been adjusted by distributing the total of the two categories in proportion to the numbers in each in 1963.

TABLE 22

TEN LEADING DIAGNOSTIC CATEGORIES (CANADIAN LIST OF 98 DIAGNOSES) AMONG SEPARATIONS OF PATIENTS (EXCLUDING NEWBORN) INSURED BY PROVINCIAL PLANS, NUMBER, RANK⁽¹⁾ AND PERCENTAGE DISTRIBUTION, CANADA, 1963-1966

Canadian List Number	Diagnosis	1966			1965			1964			1963		
		Number	Rank	%	Number	Rank	%	Number	Rank	%	Number	Rank	%
75	Delivery without mention of complications	342,813 ⁽¹⁾	1	10.9	376,562 ⁽²⁾	1	12.2	409,564 ⁽²⁾	1	13.3	413,213	1	14.1
50	Hypertrophy of tonsils and adenoids	200,802	2	6.4	196,741	2	6.4	200,408	2	6.5	196,834	2	6.7
38	Arteriosclerotic and degenerative heart disease	111,602	3	3.6	106,474	3	3.4	102,810	3	3.3	93,449	4	3.2
48	Pneumonia	103,927	4	3.3	102,119	4	3.3	99,619	4	3.2	99,457	3	3.4
61	Diseases of gallbladder and pancreas	80,450	5	2.6	75,508	6	2.4	71,727	6	2.3	63,983	6	2.2
73	Complications of pregnancy	75,490	6	2.4	78,438	5	2.5	80,821	5	2.6	79,180	5	2.7
56	Hernia of abdominal cavity	70,807	7	2.3	68,723	7	2.2	65,801	7	2.1	61,992	7	2.1
49	Bronchitis	65,310	8	2.1	62,257	8	2.0	58,256	9	1.9	54,819	9	1.9
46	Acute upper respiratory infections	55,873	9	1.8	53,889	9	1.7	50,559	14	1.6	48,117	12	1.6
30	Psychoneurotic disorders	52,535	10	1.7	51,699	12	1.7	50,857	13	1.7	42,449	14	1.4
	Other Diagnoses	1,973,206	-	63.0	1,920,258	-	62.1	1,884,645	-	61.3	1,776,106	-	60.6
	All Diagnoses	3,132,815	-	100.0	3,092,668	-	100.0	3,074,067	-	100.0	2,929,599	-	100.0

(1) Certain residual and heterogeneous categories are excluded from the ranking (See Table A 21).

(2) Figure estimated to offset a coding variation in Ontario.

Source: Data supplied to the Department by Provincial Plans.

Hospital Personnel

Hospital personnel accounts for two-thirds of hospital costs. The number of employees has been increasing absolutely, as well as relative to the population and to the number of patients. In listed hospitals from 1961 to 1966, the proportion of employees increased from 3 to 3.5 per cent of the total labour force; it is actually over 4 per cent if one were to include all hospitals.

The number of employees in the reporting hospitals for the year 1961 to 1966 is shown in Table 23. Over this period, full-time employees increased by 30 per cent, from 186,000 to 242,000. Part-time employees constituted 10 per cent of the total in 1961, and 12 per cent in 1966; their number increased by 65 per cent from 20,000 to 33,000.

There have been some changes over the five-year period which caused increase in hospital personnel, and others which tend to offset this trend. Hospitals provided more service; for both the number of patient-days per year and the number of beds increased by 13 per cent (Table 11). Furthermore, hospital care itself has changed; this is borne out by the increasing number of hours of work per patient-day. On the other hand, increasing use of labour-saving devices, improvements in work methods and administration, and changes in the type of goods purchased to those which require less labour (e.g., prepared meals instead of bulk food, and devices which are replaced after being used instead of those which require cleaning) will tend to offset the rise in personnel. Thus, the increase in personnel can be attributed to increase in workload (patient-days), to increase of paid working hours per patient-day, and to the tendency of decreasing the number of working hours of full-time employees by reducing the number of working hours per week and by granting more leave of absence.

From 1965 to 1966, full-time personnel in Canada increased by 4.6 per cent. In Newfoundland, a large hospital was built in 1966; the personnel in Newfoundland increased by 15 per cent. In Alberta, several hospitals began operation in 1966; personnel increased by 10 per cent. Of the other provinces, the largest increase was recorded for Quebec: 6 per cent, together with a 28 per cent increase in part-time personnel. In all other provinces except New Brunswick, staff increased from between 4 per cent in British Columbia to 1.4 per cent in Saskatchewan. New Brunswick reported a small reduction.

The proportion of part-time employees, 12 per cent for Canada in 1966, had been rising. Thus, in most provinces, the number of part-time employees increased by a greater proportion than the number of full-time staff, e.g.: Ontario and Manitoba, where the full-time staff increased by 3 and 4 per cent, and part-time staff increased by 14 and 8 per cent, respectively, over the preceding year. In Newfoundland, Nova Scotia, and Quebec, part-time staff increased by over 25 per cent (Table 23).

TABLE 23

PERSONNEL IN LISTED HOSPITALS, FULL-TIME AND PART-TIME, CANADA AND PROVINCES,
1961-1966

PROV. INCE	Number of Hospitals Reporting						Full-Time						Part-Time					
	1961	1962	1963	1964	1965	1966	1961	1962	1963	1964	1965	1966	1961	1962	1963	1964	1965	1966
Nfld.	42	43	45	46	47	48	3,004	3,129	3,494	4,473	4,637	5,322	146	104	332	209	168	233
P.E.I.	9	99	9	9	9	9	908	931	938	945	1,032	1,071	72	47	69	74	85	82
N.-S.	48	48	48	48	48	48	7,452	7,531	7,954	8,245	8,467	8,687	516	792	606	607	830	1,046
N.-B.	40	39	40	42	40	40	6,715	6,893	7,374	7,552	7,673	7,651	530	389	397	591	666	608
Que.	243	262	268	269	268	264	51,503	56,169	60,370	64,870	71,258	75,642	4,812	4,911	4,819	5,135	6,071	7,749
Ont.	325	321	318	319	314	311	66,466	70,205	73,835	77,015	80,348	82,557	9,172	10,537	11,134	12,430	13,424	15,344
Man.	100	101	103	104	101	101	10,053	10,604	11,096	11,294	11,395	11,798	1,431	1,410	1,653	1,685	2,092	2,269
Sask.	160	160	159	156	158	157	10,310	10,389	10,751	11,072	11,352	11,511	709	734	989	1,189	1,291	1,404
Alta.	122	126	132	137	141	151	13,982	14,635	15,538	16,381	16,903	18,645	954	1,095	1,260	1,569	1,699	2,088
B.C.	111	111	111	111	119	120	15,298	15,534	15,938	16,410	17,537	18,240	1,753	1,572	1,709	1,916	2,175	2,353
Yukon	3	3	3	5	5	5	139	158	147	153	152	158	36	64	33	9	5	9
N.W.T.	22	19	25	26	25	27	242	189	343	362	337	362	22	83	43	91	59	69
Canada	1,225	1,242	1,261	1,272	1,275	1,281	180,072	190,367	201,778	218,772	231,091	241,644	20,153	21,738	23,044	25,505	28,565	33,254

Source: Table A23 and annual reports.

Classification of personnel in 1966 is shown in Table 24. Generally, increases in professional and technical staff over the preceding year were above the average (5.2 per cent), e. g.: physicians 9 per cent; qualified nurses and nursing assistants 7 per cent; physiotherapists 11 per cent; occupational therapists 12 per cent; psychologists 21 per cent; social workers 7 per cent. These data refer to full-time staff except trainees.

The number of residents and interns remained the same as in 1965. Nurses and nursing assistants in training increased by 1.3 per cent. Laboratory and radiological technicians in training declined.

Table 25 shows man-hours in budget-review general hospitals and their relationship to the patient load. Hours per patient-day, i. e., the average staff time required to provide hospital care for one patient, increased continuously from 12.6 hours per day in 1961 to 14.4 in 1966. The average increase from year to year was 21 minutes per patient-day for the period and 26 minutes between 1965 and 1966. This increasing ratio reflected both more intensive care and a greater diversity of services.

Over one-half of the work done in listed hospitals is contributed by the nursing staff. In terms of persons employed, the 106,335 full-time nursing personnel contributed 51.5 per cent of all full-time employees at the end of 1966 (51.3 per cent at the end of 1965). There were also 18,240 persons employed as part-time nursing personnel (except trainees); this number was 21 per cent higher than that for the preceding year (Table 24).

Tables 25 and A26, which deal only with budget-review general hospitals, show the man-hours that the nursing staff contributes. The proportion rose from 52.9 per cent in 1961 to 55.8 per cent in 1963 and declined to 55.3 per cent in 1966.

TABLE 24

PERSONNEL IN LISTED HOSPITALS, FULL-TIME AND PART-TIME BY PROFESSION,
CANADA, 1966

Category	Full-Time	Part-Time	Total	Per Cent of Total Personnel
EMPLOYEES (Except Trainees)	1,795	2,618	4,413	1.6
A. Medical				
B. Nursing				
1 - Graduate nurses	50,618	11,472	62,090	22.6
2 - Qualified nursing assistants	19,158	2,036	21,194	7.7
3 - Orderlies	9,338	540	9,878	3.6
4 - Other	27,221	4,192	31,413	11.4
TOTAL	106,335	18,240	124,575	45.3
C. Other professional and technical				
1 - Hospital administrators	1,344	152	1,496	.5
2 - Dietitians	966	151	1,117	.4
3 - Medical record librarians	994	123	1,117	.4
4 - Laboratory technicians	5,635	605	6,240	2.3
5 - Radiological technicians	2,880	209	3,089	1.1
6 - Combined lab. and radiological technicians	266	42	308	.1
7 - Physiotherapists	1,264	231	1,495	.5
8 - Occupational therapists	348	70	418	.2
9 - Pharmacists	800	225	1,025	.4
10 - Psychologists	120	78	198	.1
11 - Social Workers	459	96	555	.2
TOTAL	15,076	1,982	17,058	6.2
D. Other personnel	83,303	10,198	93,501	34.0
TOTAL EMPLOYEES (Except Trainees)	206,509	33,038	239,547	87.1
TRAINEES				
A. Medical				
1 - Residents and senior interns	3,206	125	3,331	1.2
2 - Junior interns	1,242	91	1,333	.5
TOTAL	4,448	216	4,664	1.7
B. Nursing				
1 - Student nurses	23,753	-	23,753	8.6
2 - Nursing assistants	4,587	-	4,587	1.7
TOTAL	28,340	-	28,340	10.3
C. Other professional and technical				
1 - Medical record librarians	98	-	98	*
2 - Laboratory technicians	1,103	-	1,103	.4
3 - Radiological technicians	1,146	-	1,146	.4
TOTAL	2,347	-	2,347	.9
TOTAL TRAINEES	35,135	216	35,351	12.9
TOTAL PERSONNEL	241,644	33,254	274,898	100.0

*Less than 0.05.

Source: Tables A23 and A24 and annual reports.

TABLE 25

HOURS OF WORK IN BUDGET REVIEW GENERAL HOSPITALS,
TOTAL AND PER PATIENT-DAY FOR NURSING AND OTHER PERSONNEL,
CANADA, 1961-1966

Year	Total	Nursing Personnel	Other Personnel
TOTAL			
1961.....	328,165,256	173,553,050	154,612,206
1962.....	352,796,076	192,910,088	159,885,988
1963.....	372,316,575	207,648,065	164,668,510
1964.....	396,390,105	221,053,077	175,337,028
1965.....	414,818,648	229,999,868	184,818,780
1966.....	432,653,173	239,426,881	193,226,292
PER PATIENT-DAY			
1961.....	12.65	6.69	5.96
1962.....	12.95	7.08	5.87
1963.....	13.17	7.35	5.83
1964.....	13.59	7.58	6.01
1965.....	13.96	7.74	6.22
1966.....	14.40	7.97	6.44

Source: Table A 26

TABLE A1

STATUS OF HOSPITALS AND OTHER FACILITIES LISTED IN HOSPITAL INSURANCE AGREEMENTS,
CANADA AND PROVINCES, DECEMBER 31st, 1966

PROVINCE	Number of Hospitals ⁽¹⁾				Number of Other Facilities ⁽²⁾	Total
	Budget Review	Contract	Government of Canada	Total		
Newfoundland	46	1	1	48	1	49
Prince Edward Island	9	—	—	9	1	10
Nova Scotia	47	—	1	48	2	50
New Brunswick	39	—	1	40	1	41
Quebec	170	84	11	265	6	271
Ontario	220	84	12	316	4	320
Manitoba	81	5	16	102	2	104
Saskatchewan	151	5	3	159	8	167
Alberta	142	2	8	152	20	172
British Columbia	101	13	5	120	1	121
Yukon	2	—	3	5	1	6
Northwest Territories	2	7	20	29	1	30
CANADA	1,010	201	82	1,293	48	1,341

⁽¹⁾Excludes 3 hospitals in the U.S.A. near the Canadian border that are listed in the agreements with New Brunswick and Manitoba.

⁽²⁾Comprises (a) budget review facilities; 3 rehabilitation clinics and 1 university clinic in Quebec; 1 cancer clinic in Manitoba; 1 provincial laboratory, 2 cancer clinics and 2 physical restoration centres in Saskatchewan; and 3 cancer clinics and 2 provincial laboratories in Alberta; and (b) contract facilities: 1 medical centre in Nova Scotia; 1 laboratory in Saskatchewan; 7 laboratories and 6 radiological facilities in Alberta; and 12 Red Cross blood depots.

TABLE A2

PATIENT-DAYS EXCLUDING NEWBORN IN HOSPITALS LISTED IN HOSPITAL INSURANCE AGREEMENTS BY RESPONSIBILITY
FOR PAYMENT, CANADA AND PROVINCES, 1966

PROVINCE	Provincial Plan	Insured Res- ident's Care, Not Respon- sibility of Provincial Plan	Uninsured Residents of the Province	Non-Resi- dents of the Province	Workmen's Compensa- tion Boards	Government of Canada	Total	Number of Hospitals Reporting ⁽¹⁾
Newfoundland	681,111	27,166	342	4,779	13,116	11,468	737,982	48
Prince Edward Island	176,291	306	12	2,778	2,032	2,425	183,844	9
Nova Scotia	1,213,376	257	1,153	30,003	21,322	89,025	1,355,136	48
New Brunswick	1,091,314	20	1,469	42,630	19,299	44,528	1,199,260	40
Quebec	10,113,385	2,941	1,707	101,926	136,677	406,918	10,763,554	267
Ontario	13,060,038	230,832	169,064	222,132	258,092	505,143	14,445,301	311
Manitoba	1,782,796	77,429	1,533	69,522	23,442	20,851	1,975,573	101
Saskatchewan	2,124,079	46	9,525	33,247	19,629	30,251	2,216,777	158
Alberta	3,154,024	53	1,257	71,125	59,591	104,527	3,390,577	151
British Columbia	3,309,140	63,149	5,377	42,895	79,242	243,975	3,743,778	120
Yukon	21,642	211	37	2,640	1,029	275	25,834	5
Northwest Territories	37,232	414	6	3,973	1,366	20,964	63,955	27
CANADA	36,764,428	402,824	191,482	627,650	634,837	1,480,350	40,101,571	1,285

⁽¹⁾Includes 4 hospitals that closed during the year.

TABLE A 3

PERCENTAGE DISTRIBUTION OF PATIENT-DAYS EXCLUDING NEWBORN IN HOSPITALS LISTED IN
HOSPITAL INSURANCE AGREEMENTS BY RESPONSIBILITY FOR PAYMENT, CANADA AND PROVINCES 1966

PROVINCE	Provincial Plan	Insured Res- ident's Care Not Respon- sibility of Provincial Plan	Uninsured Residents of the Province	Workmen's Compensation Boards	Government of Canada	Total
Newfoundland	92.3	3.7	*	1.8	1.6	100.0
Prince Edward Island	95.9	0.2	*	1.1	1.3	100.0
Nova Scotia	89.5	*	.1	1.6	6.6	100.0
New Brunswick	91.0	*	.1	1.6	3.7	100.0
Quebec	94.0	*	*	1.3	3.8	100.0
Ontario	90.4	1.6	1.2	1.8	3.5	100.0
Manitoba	90.2	3.9	.1	1.2	1.1	100.0
Saskatchewan	95.8	*	.4	.9	1.4	100.0
Alberta	93.0	*	*	1.8	3.1	100.0
British Columbia	88.4	1.7	.1	2.1	6.5	100.0
Yukon	83.8	.8	.1	4.0	1.1	100.0
Northwest Territories	58.2	.6	*	2.1	32.8	100.0
CANADA	91.7	1.0	.5	1.6	3.7	100.0

*Less than 0.05.

Source: Table A 2

TABLE A4

PATIENT-DAYS EXCLUDING NEWBORN IN HOSPITALS LISTED IN HOSPITAL INSURANCE AGREEMENTS BY STATUS OF HOSPITAL,
NUMBER AND POPULATION RATES BY PROVINCE, AND PERCENTAGE DISTRIBUTION BY STATUS OF HOSPITAL,
CANADA AND PROVINCES, 1966

PROVINCE	Number				Total per 1,000 Population	Per Cent				Number of Hospitals Reporting
	Budget Review	Contract	Government of Canada	Total		Budget Review	Contract	Government of Canada	Total	
Newfoundland	731,870	3,999	2,113	737,982	1,496	99.2	.5	.3	100.0	48
Prince Edward Island	183,844	—	—	183,844	1,694	100.0	—	—	100.0	9
Nova Scotia	1,217,534	—	137,602	1,355,136	1,792	89.8	—	10.2	100.0	48
New Brunswick	1,105,898	—	93,362	1,199,260	1,944	92.2	—	7.8	100.0	40
Quebec	9,120,881	1,054,152	588,521	10,763,554	1,862	84.7	9.8	5.5	100.0	267
Ontario	12,822,421	770,494	852,386	14,445,301	2,075	88.8	5.3	5.9	100.0	311
Manitoba	1,780,295	10,384	184,894	1,975,573	2,051	90.1	.5	9.4	100.0	101
Saskatchewan	2,190,237	4,308	22,232	2,216,777	2,320	98.8	.2	1.0	100.0	158
Alberta	3,137,399	10,707	242,471	3,390,577	2,317	92.5	.3	7.2	100.0	151
British Columbia	3,194,138	8,269	541,371	3,743,778	1,998	85.3	.2	14.5	100.0	120
Yukon	3,303	—	22,531	25,834	1,796	12.8	—	87.2	100.0	5
Northwest Territories	14,389	22,733	26,833	63,955	2,225	22.5	35.5	42.0	100.0	27
CANADA	35,502,209	1,885,046	2,714,316	40,101,571	2,004	88.5	4.7	6.8	100.0	1,285

TABLE A5

PATIENT-DAYS EXCLUDING NEWBORN IN BUDGET REVIEW HOSPITALS, NUMBER AND PERCENTAGE
DISTRIBUTION BY TYPE OF ACCOMMODATION,
CANADA AND PROVINCES, 1966

PROVINCE	Number			Per Cent			Total Patient-days
	Standard Ward	Private Rooms	Semi- private Rooms	Standard Ward	Private Rooms	Semi- private Rooms	
Newfoundland	661,954	27,954	41,962	90.4	3.8	5.7	731,870
Prince Edward Island	147,021	6,632	30,191	80.0	3.6	16.4	183,844
Nova Scotia	863,432	121,894	232,208	70.9	10.0	19.1	1,217,534
New Brunswick	704,322	101,723	299,853	63.7	9.2	27.1	1,105,898
Quebec	5,321,025	1,087,961	2,711,895	58.3	11.9	29.7	9,120,881
Ontario	7,855,305	906,114	4,061,002	61.3	7.1	31.6	12,822,421
Manitoba	1,503,398	44,198	232,709	84.4	2.5	13.1	1,780,295
Saskatchewan	1,940,811	87,371	162,055	88.6	4.0	7.4	2,190,237
Alberta	2,659,977	172,868	304,554	84.8	5.5	9.7	3,137,399
British Columbia	2,787,590	183,938	222,610	87.3	5.7	7.0	3,194,138
Yukon	3,303	—	—	100.0	—	—	3,303
Northwest Territories	14,389	—	—	100.0	—	—	14,389
CANADA	24,462,517	2,740,653	8,299,039	68.9	7.7	23.4	35,502,209

TABLE A6

SEPARATIONS EXCLUDING NEWBORN IN HOSPITALS LISTED IN HOSPITAL INSURANCE AGREEMENTS, NUMBER AND RATES PER 1,000 POPULATION, CANADA AND PROVINCES, 1961-1966.

PROVINCE	Number of Separations						Rate per 1,000 Population					
	1961	1962	1963	1964	1965	1966	1961	1962	1963	1964	1965	1966
Newfoundland	50,869	54,629	56,292	58,645	64,639	65,533	111.1	116.7	118.3	121.4	132.4	132.8
Prince Edward Island	16,202	16,934	17,079	17,334	17,726	18,156	154.9	158.3	158.1	159.0	162.6	167.3
Nova Scotia	109,273	110,115	110,889	114,019	114,778	117,943	148.3	147.6	147.7	151.0	151.8	156.0
New Brunswick	104,232	104,571	105,861	108,260	108,561	107,319	174.3	172.8	173.8	177.2	176.5	174.0
Quebec	722,909	745,891	771,052	788,029	797,040	792,489	137.5	138.9	140.7	141.1	140.2	137.1
Ontario	949,027	969,272	1,007,587	1,038,416	1,051,620	1,064,988	152.2	152.6	155.5	156.6	154.9	153.0
Manitoba	165,244	170,407	175,525	176,138	171,676	175,030	179.3	182.0	184.9	183.7	177.9	181.7
Saskatchewan	199,236	195,951	210,958	211,481	212,052	211,641	215.3	210.7	226.1	224.5	223.2	221.5
Alberta	261,244	268,690	273,509	283,387	287,440	292,460	196.1	196.3	194.9	198.3	198.2	199.9
British Columbia	285,744	291,650	300,939	307,080	316,285	329,058	175.4	175.7	177.1	176.0	176.0	175.6
Yukon	3,458	3,671	3,297	2,931	2,825	2,961	236.4	244.7	219.8	195.4	201.8	205.9
Northwest Territories	4,548	5,965	6,775	6,572	6,554	7,053	197.8	238.6	260.6	243.4	242.7	245.4
CANADA	2,871,986	2,937,746	3,039,763	3,112,292	3,151,196	3,184,631	157.5	158.1	160.6	161.3	160.4	159.1

TABLE A7

AVERAGE LENGTH OF STAY EXCLUDING NEWBORN IN HOSPITALS LISTED IN HOSPITAL INSURANCE AGREEMENTS BY STATUS
AND TYPES OF HOSPITAL, CANADA AND PROVINCES, 1966

PROVINCE	(a) Patient-Days Since Admission Divided by Separations							All Hospitals
	Budget Review					Contract	Government of Canada	
	General	Chronic	Convalescent	Other	Total			
Newfoundland	10.7	—	—	162.3	11.2	6.9	6.8	11.2
Prince Edward Island	9.9	—	—	50.0	10.2	—	—	10.2
Nova Scotia	10.6	—	28.5	8.5	10.6	—	35.5	11.5
New Brunswick	10.2	55.5	—	25.3	10.6	—	35.5	11.2
Quebec	10.2	228.9	53.2	12.6	12.4	18.6	53.0	13.3
Ontario	11.0	270.5	37.3	14.2	12.6	25.5	52.8	13.5
Manitoba	9.1	138.0	—	49.7	10.9	8.2	23.8	11.6
Saskatchewan	9.4	292.5	—	—	10.3	6.1	11.0	10.3
Alberta	8.8	181.6	—	15.0	10.8	7.0	34.8	11.4
British Columbia	9.3	178.2	—	40.3	9.7	4.2	46.1	11.0
Yukon	6.0	—	—	—	6.0	—	8.7	8.2
Northwest Territories	6.8	—	—	—	6.8	11.3	8.7	8.8
CANADA	10.1	221.4	42.5	16.8	11.7	20.1	38.8	12.4

TABLE A7 (concluded)

PROVINCE	(b) Patient-Days during Year Divided by Separations						
	Budget Review				Contract	Government of Canada	All Hospitals
	General	Chronic	Convalescent	Other			
Newfoundland	10.7	—	—	185.2	6.7	6.7	11.3
Prince Edward Island	9.8	—	—	55.8	—	—	10.1
Nova Scotia	10.6	—	28.8	8.5	—	34.8	11.5
New Brunswick	10.2	60.1	—	24.4	—	33.9	11.2
Quebec	10.3	207.6	55.4	12.8	24.4	56.4	13.6
Ontario	11.1	257.2	37.3	14.2	25.8	44.0	13.4
Manitoba	9.1	125.8	—	47.4	8.4	20.5	11.3
Saskatchewan	9.5	337.5	—	—	6.1	10.5	10.5
Alberta	8.8	209.1	—	15.7	6.9	32.4	11.6
British Columbia	9.4	632.3	—	44.7	4.2	44.6	11.4
Yukon	5.9	—	—	—	—	9.4	8.7
Northwest Territories	6.8	—	—	—	11.8	8.9	9.1
CANADA	10.2	219.8	43.3	17.3	23.3	36.5	12.5

TABLE A8

PERCENTAGE DISTRIBUTION OF PATIENT-DAYS SINCE ADMISSION
BY LENGTH OF STAY, CANADA AND PROVINCES, (1) 1966

Length of Stay (in days)	Newfound- land	Prince Edward Island	New Brunswick	Quebec	Ontario	Manitoba	Saskatch- ewan	Alberta	British Columbia	Yukon	Northwest Territories	CANADA
1	0.6	0.6	0.5	0.7	0.7	0.7	0.8	0.8	0.7	1.1	1.1	0.7
2	1.6	1.5	1.6	1.2	1.6	2.5	2.8	2.4	3.1	3.6	2.0	1.8
3	2.8	2.5	2.4	1.4	1.6	2.4	2.9	2.5	2.6	4.3	2.7	1.9
4 - 6	12.9	13.3	13.2	9.6	9.0	12.0	13.5	11.2	12.1	17.7	14.9	10.2
7 - 10	13.6	17.7	16.7	12.3	11.5	13.6	16.1	14.1	16.2	17.9	18.6	12.9
11 - 14	11.3	12.3	12.7	11.0	8.7	9.8	11.7	9.3	11.4	12.2	11.4	10.0
15 - 29	24.1	23.1	25.7	24.2	19.6	20.3	23.0	17.3	23.8	19.8	20.8	21.5
30 - 59	16.9	15.8	15.7	13.7	15.8	15.3	15.1	12.8	17.6	14.6	15.3	15.0
60 +	16.1	13.1	11.4	26.0	31.4	23.5	13.9	29.7	12.5	8.7	13.3	25.8
TOTAL	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0

(1) Excludes Nova Scotia. See footnotes for Table 10 and Table A22.

TABLE A9

BUDGET REVIEW GENERAL HOSPITALS AND AVERAGE NUMBER OF DAYS OF CARE
SINCE ADMISSION FOR SEPARATIONS BY SIZE OF HOSPITAL, CANADA AND PROVINCES, 1966

PROVINCE	Number of Hospitals Reporting	Size of Hospital (Rated Bed Capacity)								1,000 and over	All Hospitals
		1-9	10-24	25-49	50-99	100-199	200-299	300-499	500-599		
Newfoundland	43	4.6	6.2	7.9	9.2	11.2	11.6	10.8	22.7	—	10.7
Prince Edward Island	8	—	8.6	8.1	7.1	10.5	10.9	—	—	—	9.9
Nova Scotia	44	9.2	7.8	9.0	9.7	10.1	11.3	10.5	13.9	—	10.6
New Brunswick	36	7.6	8.1	7.8	9.1	9.6	10.0	11.9	15.6	—	10.2
Quebec	128	11.2	7.3	8.0	8.0	8.9	9.9	10.5	12.1	12.3	10.2
Ontario	194	6.9	7.1	9.2	10.0	9.8	10.5	11.1	11.7	13.9	11.0
Manitoba	77	8.8	7.2	7.3	7.7	9.7	8.4	9.8	10.8	12.6	9.1
Saskatchewan	148	7.4	7.2	7.5	8.5	9.4	13.7	11.5	13.0	—	9.4
Alberta	113	6.1	7.0	6.6	7.4	7.5	9.2	10.5	9.8	13.7	8.8
British Columbia	89	4.0	7.4	7.4	7.8	8.6	8.6	10.1	11.1	12.7	9.3
Yukon	2	—	6.0	—	—	—	—	—	—	—	6.0
Northwest Territories	2	—	6.6	7.0	—	—	—	—	—	—	6.8
CANADA	884 ⁽¹⁾	7.3	7.2	7.6	8.6	9.2	10.1	10.8	11.9	13.2	10.1

⁽¹⁾ The difference between this figure (which also appears in Table A16) and the 882 shown in Table 12, above, and Table A11, below, represents two hospitals that operated for part of the year (thereby entering statistics of patient-care) but were not operating at the end of the year (thereby not entering statistics of beds).

TABLE A10

BEDS IN HOSPITALS LISTED IN HOSPITAL INSURANCE AGREEMENTS BY STATUS OF HOSPITAL,
NUMBER AND PERCENTAGE DISTRIBUTION, CANADA AND PROVINCES, 1966

PROVINCE	Number of Hospitals Reporting	Number			Per cent				
		Budget Review	Contract	Government of Canada	Total	Budget Review	Contract	Government of Canada	Total
Newfoundland	48	2,914	20	44	2,978	97.8	.7	1.5	100.0
Prince Edward Island	9	525	—	—	526	100.0	—	—	100.0
Nova Scotia	48	4,377	—	461	4,838	90.5	—	9.5	100.0
New Brunswick	40	3,720	—	314	4,034	92.2	—	7.8	100.0
Quebec	264 ⁽¹⁾	31,287	3,220	2,074	36,581	85.5	8.8	5.7	100.0
Ontario	311 ⁽²⁾	42,905	2,315	2,023	47,243	90.8	4.9	4.3	100.0
Manitoba	101 ⁽³⁾	6,117	70	812	6,999	87.4	1.0	11.6	100.0
Saskatchewan	157 ⁽⁴⁾	7,685	23	87	7,795	98.6	.3	1.1	100.0
Alberta	151 ⁽⁵⁾	11,846	36	937	12,819	92.4	.3	7.3	100.0
British Columbia	120	10,551	82	1,809	12,442	84.8	.7	14.5	100.0
Yukon	5	26	—	134	160	16.2	—	83.8	100.0
Northwest Territories	27 ⁽⁶⁾	70	203	199	472	14.8	43.0	42.2	100.0
CANADA	1,281	122,124	5,969	8,894	136,987	89.1	4.4	6.5	100.0

⁽¹⁾ 1 budget review hospital did not report.⁽²⁾ 4 contract hospitals and 1 federal hospital did not report.⁽³⁾ 1 budget review hospital and 1 federal hospital did not report.⁽⁴⁾ 2 contract hospitals did not report.⁽⁵⁾ 1 federal hospital did not report.⁽⁶⁾ 2 federal hospitals did not report.

TABLE A11

BUDGET REVIEW GENERAL HOSPITALS BY SIZE OF HOSPITAL,
CANADA AND PROVINCES, 1966

PROVINCE	Size of Hospital (Rated Bed Capacity)									Total
	1-9	10-24	25-49	50-99	100-199	200-299	300-499	500-999	1,000 and over	
Newfoundland	8	14	9	4	3	2	2	1	—	43
Prince Edward Island	—	2	2	1	2	1	—	—	—	8
Nova Scotia	4	10	6	10	8	4	1	1	—	44
New Brunswick	1	7	9	6	7	4	1	1	—	36
Quebec	1	7	15	17	43	19	14	9	2	127
Ontario	4	16	29	47	34	23	25	12	4	194
Manitoba	6	37	15	10	3	3	1	1	1	77
Saskatchewan	19	77	30	8	6	2	3	2	—	147
Alberta	3	22	45	28	5	2	5	2	1	113
British Columbia	1	14	29	20	16	3	3	2	1	89
Yukon	—	2	—	—	—	—	—	—	—	2
Northwest Territories	—	1	1	—	—	—	—	—	—	2
CANADA	47	209	190	151	127	63	55	31	9	882 ⁽¹⁾

(1) See footnote for Table A9

TABLE A12

BEDS IN BUDGET REVIEW GENERAL HOSPITALS BY SIZE OF HOSPITAL,
NUMBER AND PERCENTAGE DISTRIBUTION,
CANADA AND PROVINCES, 1966

PROVINCE	Size of Hospital (Rated Bed Capacity)									
	1-9	10-24	25-49	50-99	100-199	200-299	300-499	500-999	1,000 and over	Total
Number of Beds Set up										
Newfoundland	58	284	382	262	374	362	634	442	—	2,798
Prince Edward Island	—	34	64	50	286	164	—	—	—	598
Nova Scotia	47	185	235	730	1,142	815	471	568	—	4,193
New Brunswick	14	114	362	443	827	883	367	536	—	3,546
Quebec	7	149	560	1,212	5,707	4,539	5,175	5,752	2,052	25,153
Ontario	36	308	1,164	3,427	4,688	5,812	8,997	8,259	5,158	37,849
Manitoba	61	707	546	750	374	690	408	658	948	5,142
Saskatchewan	178	1,355	1,097	648	923	524	1,091	1,224	—	7,040
Alberta	49	434	1,495	1,884	706	444	1,808	1,745	982	9,547
British Columbia	9	303	1,073	1,477	2,184	728	1,209	1,081	1,690	9,754
Yukon	—	26	—	—	—	—	—	—	—	26
Northwest Territories	—	27	43	—	—	—	—	—	—	70
CANADA	459	3,926	7,021	10,883	17,211	14,961	20,160	20,265	10,830	105,716
Per cent of Beds Set up										
Newfoundland	2.1	10.1	13.6	9.4	13.4	12.9	22.7	15.8	—	100.0
Prince Edward Island	—	5.7	10.7	8.4	47.8	27.4	—	—	—	100.0
Nova Scotia	1.1	4.4	5.6	17.4	27.2	19.4	11.2	13.5	—	100.0
New Brunswick	.4	3.2	10.2	12.5	23.3	24.9	10.3	15.1	—	100.0
Quebec	*	.6	2.2	4.8	22.7	18.0	20.6	22.9	8.2	100.0
Ontario	.1	.8	3.1	9.1	12.4	15.3	23.8	21.8	13.6	100.0
Manitoba	1.2	13.7	10.6	14.6	7.3	13.4	7.9	12.8	18.4	100.0
Saskatchewan	2.5	19.2	15.6	9.2	13.1	7.4	15.5	17.4	—	100.0
Alberta	.5	4.5	15.7	19.7	7.4	4.7	18.9	18.3	10.3	100.0
British Columbia	.1	3.1	11.0	15.1	22.4	7.5	12.4	11.1	17.3	100.0
Yukon	—	100.0	—	—	—	—	—	—	—	100.0
Northwest Territories	—	38.6	61.4	—	—	—	—	—	—	100.0
CANADA	0.4	3.7	6.6	10.3	16.3	14.2	19.1	19.2	10.2	100.0

TABLE A 13

BEDS IN BUDGET REVIEW HOSPITALS BY TYPE OF UNIT,
NUMBER AND PERCENTAGE DISTRIBUTION,
CANADA AND PROVINCES, 1966

PROVINCE	Acute Treatment					Chronic and Con- valescent	Total
	General	Obste- tric	Paedia- tric	Psychia- tric	Total		
Number							
Newfoundland	1,834	382	410	78	2,704	210	2,914
Prince Edward Island	386	85	106	—	577	49	626
Nova Scotia	2,686	640	705	60	4,091	286	4,377
New Brunswick	2,327	452	703	45	3,527	193	3,720
Quebec	18,078	3,117	4,587	591	26,373	4,914	31,287
Ontario	25,372	4,325	5,049	818	35,564	7,341	42,905
Manitoba	3,470	683	803	170	5,126	991	6,117
Saskatchewan	4,788	852	1,139	170	6,949	736	7,685
Alberta	6,357	1,224	1,594	138	9,313	2,533	11,846
British Columbia	6,656	1,186	1,667	148	9,657	894	10,551
Yukon	15	6	5	—	26	—	26
Northwest Territories	40	11	18	1	70	—	70
CANADA	72,009	12,963	16,786	2,219	103,977	18,147	122,124
Per Cent							
Newfoundland	62.9	13.1	14.1	2.7	92.8	7.2	100.0
Prince Edward Island	61.7	13.6	16.9	—	92.2	7.8	100.0
Nova Scotia	61.4	14.6	16.1	1.4	93.5	6.5	100.0
New Brunswick	62.6	12.1	18.9	1.2	94.8	5.2	100.0
Quebec	57.7	10.0	14.7	1.9	84.3	15.7	100.0
Ontario	59.1	10.1	11.8	1.9	82.9	17.1	100.0
Manitoba	56.7	11.2	13.1	2.8	83.8	16.2	100.0
Saskatchewan	62.3	11.1	14.8	2.2	90.4	9.6	100.0
Alberta	53.7	10.3	13.4	1.2	78.6	21.4	100.0
British Columbia	63.1	11.2	15.8	1.4	91.5	8.5	100.0
Yukon	57.7	23.1	19.2	—	100.0	—	100.0
Northwest Territories	57.1	15.7	25.7	1.4	100.0	—	100.0
CANADA	59.0	10.6	13.7	1.8	85.1	14.9	100.0

TABLE A 14

BEDS IN CONTRACT HOSPITALS AND IN FEDERAL HOSPITALS BY TYPE OF UNIT,
CANADA AND PROVINCES, 1966

PROVINCE	Number of Hospi- tals Re- porting	Acute Treatment					Chronic and Con- valescent	Total
		General	Obste- tric	Paedia- tric	Psychia- tric	Total		
Contract								
Newfoundland	1	15	5	—	—	20	—	20
Prince Edward Island	—	—	—	—	—	—	—	—
Nova Scotia	—	—	—	—	—	—	—	—
New Brunswick	—	—	—	—	—	—	—	—
Quebec	84	890	192	89	—	1,171	2,049	3,220
Ontario	80	601	70	83	—	754	1,561	2,315
Manitoba	5	46	7	17	—	70	—	70
Saskatchewan	3	6	14	3	—	23	—	23
Alberta	2	15	5	16	—	36	—	36
British Columbia	13	59	5	17	1	82	—	82
Yukon	—	—	—	—	—	—	—	—
Northwest Territories	7	86	19	59	—	164	39	203
CANADA	195	1,718	317	284	1	2,320	3,649	5,969
Government of Canada								
Newfoundland	1	20	10	14	—	44	—	44
Prince Edward Island	—	—	—	—	—	—	—	—
Nova Scotia	1	245	—	—	24	269	192	461
New Brunswick	1	190	—	—	32	222	92	314
Quebec	11	830	9	9	525	1,373	701	2,074
Ontario	11	657	18	59	634	1,368	655	2,023
Manitoba	15	475	25	34	32	566	246	812
Saskatchewan	3	41	8	38	—	87	—	87
Alberta	7	454	16	134	—	604	333	937
British Columbia	6	911	1	57	44	1,013	796	1,809
Yukon	3	65	24	35	2	126	8	134
Northwest Territories	18	100	31	67	1	199	—	199
CANADA	77	3,988	142	447	1,294	5,871	3,023	8,894

TABLE A 15

OCCUPANCY⁽¹⁾ OF HOSPITALS LISTED IN HOSPITAL INSURANCE AGREEMENTS
BY STATUS OF HOSPITAL, CANADA AND PROVINCES, 1966

PROVINCE	Budget Review					Contract	Government of Canada
	General	Chronic	Convales- cent	Other	Total		
	%	%	%	%	%	%	%
Newfoundland	76.5	—	—	95.4	77.4	54.8	19.8
Prince Edward Island	81.2	—	—	68.8	80.6	—	—
Nova Scotia	76.8	—	95.0	62.6	76.5	—	81.8
New Brunswick	81.9	96.3	—	76.5	82.1	—	81.5
Quebec	79.2	92.6	85.1	63.6	80.4	91.0	80.1
Ontario	82.6	95.6	88.0	87.3	84.1	91.2	78.1
Manitoba	79.3	91.8	—	88.5	81.1	42.1	62.6
Saskatchewan	76.8	94.6	—	—	78.3	51.3	70.0
Alberta	72.7	88.9	—	74.0	75.6	81.5	70.9
British Columbia	82.7	98.4	—	80.0	83.2	23.2	82.0
Yukon	34.8	—	—	—	34.8	—	46.1
Northwest Territories	66.3	—	—	—	66.3	30.7	36.9
CANADA	79.9	93.3	86.9	71.4	81.2	87.0	75.8

⁽¹⁾ The ratio of the average number of patients to the number of available beds.

TABLE A 16

OCCUPANCY⁽¹⁾ OF BUDGET REVIEW GENERAL HOSPITALS BY SIZE OF HOSPITAL
CANADA AND PROVINCES, 1966.

PROVINCE	Number of Hospitals Reporting	Size of Hospital (Rated Bed Capacity)								1,000 and over	Total
		1-9	10-24	25-49	50-99	100-199	200-299	300-499	500-999		
		%	%	%	%	%	%	%	%	%	%
Newfoundland	43	24.3	56.2	61.4	75.5	78.4	91.6	78.1	96.7	—	76.5
Prince Edward Island	8	—	53.9	93.6	59.5	85.7	80.5	—	—	—	81.2
Nova Scotia	44	43.8	63.1	75.6	70.1	76.3	78.4	81.4	87.3	—	76.8
New Brunswick	36	84.0	65.1	78.8	77.1	81.0	83.5	88.1	85.9	—	81.9
Quebec	128	53.4	64.6	75.2	77.8	75.9	77.8	80.0	81.3	86.3	79.2
Ontario	194	42.0	63.5	68.6	78.4	78.9	83.2	83.7	86.4	85.3	82.6
Manitoba	77	65.3	67.0	70.7	74.6	79.5	80.9	85.7	88.6	87.3	79.3
Saskatchewan	148	53.7	68.4	75.3	77.3	75.3	75.7	85.5	84.1	—	76.8
Alberta	113	46.4	55.4	63.5	66.0	74.0	74.2	73.0	84.5	84.7	72.7
British Columbia	89	22.2	58.1	67.2	80.6	83.4	83.2	86.9	87.5	92.1	82.7
Yukon	2	—	34.8	—	—	—	—	—	—	—	34.8
Northwest Territories	2	—	70.2	63.2	—	—	—	—	—	—	63.2
CANADA	884 ⁽¹⁾	49.3	63.8	69.6	75.5	78.1	80.8	82.1	85.1	86.8	79.9

⁽¹⁾The ratio of the average number of patients to the number of available beds.⁽²⁾See footnote to Table A9.

TABLE A 17

NEWBORN SERVICES IN HOSPITALS LISTED IN HOSPITAL INSURANCE AGREEMENTS:
BASSINETS, PATIENT-DAYS, SEPARATIONS, AND AVERAGE LENGTH OF STAY,
CANADA AND PROVINCES, 1966.

PROVINCE	Hospitals Reporting Bassinets	Bassinets	Patient-Days	Separations	Average Length ⁽¹⁾ of Stay
Newfoundland	43	491	76,919	13,144	5.9
Prince Edward Island	8	136	13,652	2,207	6.2
Nova Scotia	43	859	104,181	15,326	6.8
New Brunswick	36	669	83,411	12,959	6.4
Quebec	162	3,991	688,947	110,029	6.3
Ontario	202	5,957	935,292	132,926	7.0
Manitoba	93	1,002	117,756	18,367	6.4
Saskatchewan	153	1,388	123,962	19,137	6.5
Alberta	118	1,755	218,725	30,282	7.2
British Columbia	97	1,555	236,349	32,696	7.2
Yukon	5	44	1,987	362	5.5
Northwest Territories	27	92	5,507	942	5.8
CANADA	987	17,939	2,606,688	388,377	6.7

⁽¹⁾ Patient-days during the year divided by number of separations.

TABLE A 18

REVENUE FUND EXPENDITURES OF BUDGET REVIEW HOSPITALS,
BY TYPE OF ACCOUNT, CANADA AND PROVINCES, 1966.

PROVINCE	Number of Hospitals Reporting	Departmental Expense						Other (Non-departmental) Revenue Fund Expense	Total Revenue Fund Expense	Number of Patient-days
		Salaries	Medical and Surgical Supplies	Drugs	Raw Food	Other Departmental Expense	Total Departmental Expense			
Newfoundland	46	12,234,466	835,228	1,223,397	1,779,059	5,494,968	21,567,118	1,655,281	23,222,399	723,306
Prince Edward Island	9	2,909,512	148,566	197,089	319,337	945,220	4,519,724	372,739	4,892,463	183,844
Nova Scotia	47	23,989,358	1,285,173	1,537,204	2,358,209	9,279,430	38,449,374	2,964,449	41,413,823	1,217,534
New Brunswick	39	20,821,446	1,263,849	1,326,402	2,041,699	6,905,055	32,358,451	3,370,245	35,728,696	1,105,898
Quebec	170	276,353,668	11,819,062	14,324,644	17,075,087	58,213,617	377,786,078	23,560,526	401,346,604	9,120,881
Ontario	220	300,040,337	13,831,037	16,510,122	20,324,132	80,213,576	430,928,204	26,114,657	457,042,861	12,826,687
Manitoba	82	36,396,671	1,801,924	2,388,540	2,602,227	9,334,412	52,523,774	3,263,684	55,787,458	1,780,295
Saskatchewan	144	38,816,358	1,884,054	2,284,553	2,985,172	10,291,034	56,261,171	3,928,385	60,189,556	1,966,661
Alberta	142	58,421,658	2,608,492	3,121,790	5,451,789	14,747,925	84,351,654	9,891,949	94,243,603	3,137,399
British Columbia	101	67,956,518	3,276,085	3,644,578	4,675,053	16,329,883	95,882,117	5,678,388	101,560,505	3,194,138
Yukon	2	103,687	7,605	5,221	7,521	41,254	165,288	9,339	174,627	3,303
Northwest Territories	2	246,452	12,920	17,662	25,782	139,291	442,107	44,884	486,991	14,389
CANADA	1004	838,299,131	38,773,995	46,581,202	59,645,067	211,935,665	1,195,235,060	80,854,526	1,276,089,586	35,274,335

TABLE A 19

REVENUE FUND EXPENDITURES OF BUDGET REVIEW HOSPITALS BY TYPE OF ACCOUNT, CANADA AND PROVINCES, 1966
(DOLLARS PER PATIENT-DAY)

PROVINCE	Salaries and Wages	Departmental Expense					Other (Non-departmental) Revenue Fund Expense	Total Revenue Fund Expense
		Medical and Surgical Supplies	Drugs	Raw Food	Other Departmental Expense	Total Departmental Expense		
Newfoundland	\$ 16.91	\$ 1.15	\$ 1.69	\$ 2.46	\$ 7.60	\$ 29.82	\$ 2.29	\$ 32.10
Prince Edward Island	15.82	.81	1.07	1.74	5.14	24.58	2.03	26.61
Nova Scotia	19.70	1.06	1.26	1.94	7.62	31.58	2.43	34.01
New Brunswick	18.83	1.14	1.20	1.85	6.24	29.26	3.05	32.31
Quebec	30.30	1.30	1.57	1.87	6.38	41.42	2.58	44.00
Ontario	23.39	1.08	1.29	1.58	6.25	33.60	2.03	35.63
Manitoba	20.44	1.01	1.34	1.46	5.24	29.50	1.83	31.34
Saskatchewan	19.74	.96	1.16	1.52	5.23	28.61	2.00	30.60
Alberta	18.62	.83	1.00	1.74	4.70	26.89	3.15	30.04
British Columbia	21.28	1.02	1.14	1.46	5.11	30.02	1.78	31.80
Yukon	31.39	2.30	1.58	2.28	12.49	50.04	2.83	52.87
Northwest Territories	17.13	.90	1.23	1.79	9.68	30.73	3.12	33.84
CANADA	23.77	1.10	1.32	1.69	6.01	33.88	2.29	36.18

TABLE A 20

REVENUE FUND EXPENDITURES OF BUDGET REVIEW HOSPITALS BY TYPE OF ACCOUNT, CANADA AND PROVINCES, 1966
(DOLLARS PER CAPITA)⁽¹⁾

PROVINCE	Departmental Expense						Other (Non-departmental) Revenue Fund Expense	Total Revenue Fund Expense
	Salaries and Wages	Medical and Surgical Supplies	Drugs	Raw Food	Other Departmental Expense	Total Departmental Expense		
Newfoundland	\$ 24.80	\$ 1.69	\$ 2.48	\$ 3.60	\$ 11.14	\$ 43.71	\$ 3.35	\$ 47.07
Prince Edward Island	26.81	1.37	1.82	2.94	8.71	41.64	3.43	45.08
Nova Scotia	31.73	1.70	2.03	3.12	12.27	50.86	3.92	54.78
New Brunswick	33.76	2.05	2.15	3.31	11.19	52.46	5.46	57.93
Quebec	47.81	2.04	2.48	2.95	10.07	65.35	4.08	69.43
Ontario	43.11	1.99	2.37	2.92	11.52	61.91	3.75	65.66
Manitoba	37.79	1.87	2.48	2.70	9.69	54.54	3.39	57.93
Saskatchewan	40.63	1.97	2.39	3.12	10.77	58.89	4.11	63.00
Alberta	39.93	1.78	2.13	3.73	10.08	57.65	6.76	64.41
British Columbia	36.27	1.75	1.95	2.49	8.71	51.17	3.03	54.20
Yukon	7.21	.53	.36	.52	2.87	11.49	.65	12.14
Northwest Territories	8.57	.45	.61	.90	4.85	15.38	1.56	16.94
CANADA	41.88	1.94	2.33	2.98	10.59	59.72	4.04	63.76

⁽¹⁾ Based on Census of Canada, June 1, 1966, Dominion Bureau of Statistics.

TABLE A 21

REVENUE FUND EXPENDITURES OF BUDGET REVIEW HOSPITALS BY TYPE OF ACCOUNT, CANADA AND PROVINCES, 1966
(PERCENTAGE DISTRIBUTION)

PROVINCE	Departmental Expense						Other (Non-departmental) Revenue Fund Expense	Total Revenue Fund Expense
	Salaries and Wages	Medical and Surgical Supplies	Drugs	Raw Food	Other Departmental Expense	Total Departmental Expense		
Newfoundland	52.7	3.6	5.3	7.7	23.7	92.9	7.1	100.0
Prince Edward Island	59.5	3.0	4.0	6.5	19.3	92.4	7.6	100.0
Nova Scotia	57.9	3.1	3.7	5.7	22.4	92.8	7.2	100.0
New Brunswick	58.3	3.5	3.7	5.7	19.3	90.6	9.4	100.0
Quebec	68.8	2.9	3.6	4.3	14.5	94.1	5.9	100.0
Ontario	65.7	3.0	3.6	4.4	17.6	94.3	5.7	100.0
Manitoba	65.2	3.2	4.3	4.7	16.7	94.1	5.9	100.0
Saskatchewan	64.5	3.1	3.8	5.0	17.1	93.5	6.5	100.0
Alberta	62.0	2.8	3.3	5.8	15.6	89.5	10.5	100.0
British Columbia	66.9	3.2	3.6	4.6	16.1	94.4	5.6	100.0
Yukon	59.4	4.4	3.0	4.3	23.6	94.7	5.3	100.0
Northwest Territories	50.6	2.7	3.6	5.3	28.6	90.8	9.2	100.0
CANADA	65.7	3.0	3.7	4.7	16.6	93.7	6.3	100.0

TABLE A 22

DIAGNOSES (CANADIAN LIST OF 98 DIAGNOSES) OF PATIENTS, EXCLUDING NEWBORN WHOSE CARE WAS PROVIDED BY PROVINCIAL PLANS,⁽¹⁾CANADA, 1966

Canadian List Number and Diagnosis	I.S.C. No.	Separations		Patient-Days Since Admission		Average Length of Stay	Percentage Distribution	
		Total	Rate per 1000 Population	Total	Rate per 1000 Population		Separations	Patient-Days
ALL DIAGNOSES (1-94) ⁽²⁾		3,132,815	156.5	37,641,262	1,880.7	12.0	100.0	100.0
I. INFECTIVE AND PARASITIC DISEASES		43,120	2.2	574,352	28.7	13.3	1.4	1.5
1. Tuberculosis, all forms	001-019	3,394	0.2	67,781	3.4	20.0	0.1	0.2
2. Poliomyelitis and encephalitis	080-083	1,938	0.1	82,827	4.1	42.7	0.1	0.2
3. Infectious hepatitis	092	4,050	0.2	58,925	2.9	14.5	0.1	0.2
*4. Other diseases attributable to viruses	084-091,093-096	16,424	0.8	151,217	7.6	9.2	0.5	0.4
*5. Other infective bacterial, spirochetal, rickettsial, or parasitic diseases	020-064,070-074 100-108,110-117 120-138	17,314	0.9	213,602	10.7	12.3	0.6	0.6
II. NEOPLASMS		181,252	9.1	3,381,720	169.0	18.7	5.8	9.0
6. Malignant neoplasm of buccal cavity and pharynx	140-148	2,935	0.1	66,179	3.3	22.5	0.1	0.2
7. Malignant neoplasm of stomach	151	5,073	0.3	148,377	7.4	29.2	0.2	0.4
8. Malignant neoplasm of large intestine except rectum	153	8,184	0.4	267,910	13.4	32.7	0.3	0.7
9. Malignant neoplasm of rectum	154	4,307	0.2	148,112	7.4	34.4	0.1	0.4
10. Malignant neoplasm of bronchus, trachea, & lung, primary & unspecified as to whether primary or secondary	162,163 170	8,656 11,447	0.4 0.6	229,759 289,551	11.5 14.5	26.5 25.3	0.3 0.4	0.6 0.8
11. Malignant neoplasm of breast								

TABLE A 22 (Cont'd)

Canadian List Number and Diagnosis	I.S.C. No.	Separations		Patient-Days Since Admission		Average Length of Stay	Percentage Distribution	
		Total	Rate per 1,000 Population	Total	Rate per 1,000 Population		Separations	Patient-Days
II. NEOPLASMS (Cont'd)								
12. Malignant neoplasm of cervix uteri	171	10,535	0.5	160,732	8.0	15.3	0.3	0.4
13. Malignant neoplasm of uterus other than of cervix uteri	172-174	2,987	0.1	58,468	2.9	19.6	0.1	0.2
14. Malignant neoplasm of ovary, Fallopian tube, and broad ligament	175	2,221	0.1	55,870	2.8	25.2	0.1	0.1
15. Malignant neoplasm of prostate	177	7,070	0.4	222,015	11.1	31.4	0.2	0.6
16. Malignant neoplasm of kidney, bladder, and other urinary organs	180,181	7,489	0.4	175,016	8.7	23.4	0.2	0.5
17. Leukaemia and aleukaemia	204	4,569	0.2	91,165	4.6	20.0	0.1	0.2
*18. Other malignant neoplasms and neoplasms of lymphatic and haematopoietic tissues	150,152,155-161, 164,165,176,178, 179,190,199,200-203,205	27,651	1.4	730,028	36.5	26.4	0.9	1.9
19. Benign neoplasm of uterus	214,215	27,228	1.4	282,522	14.1	10.4	0.9	0.8
20. Benign neoplasm of ovary	216	8,220	0.4	86,551	4.3	10.5	0.3	0.2
*21. Benign neoplasms (excluding uterus and ovary) and neoplasm of unspecified nature	210-213 217-239	42,680	2.1	369,465	18.5	8.7	1.4	1.0
III. ALLERGIC, ENDOCRINE SYSTEM, METABOLIC AND NUTRITIONAL DISEASES								
22. Asthma	241	93,124	4.7	1,505,242	75.2	16.2	3.0	4.0
*23. Other allergic disorders (excluding asthma)		22,466	1.1	239,898	12.0	10.7	0.7	0.6
	240,242-245	7,108	0.4	51,656	2.6	7.3	0.2	0.1

TABLE A 22 (Cont'd)

Canadian List Number and Diagnosis	I.S.C. No.	Separations		Patient-Days Since Admission		Average Length of Stay	Percentage Distribution	
		Total	Rate per 1,000 Population	Total	Rate per 1,000 Population		Separations	Patient-Days
III. ALLERGIC, ENDOCRINE SYSTEM, METABOLIC AND NUTRITIONAL DISEASES (Cont'd)								
24. Diseases of thyroid gland	250-254	10,933	0.5	131,169	6.6	12.0	0.3	0.3
25. Diabetes mellitus	260	40,180	2.0	891,641	44.5	22.2	1.3	2.4
26. Diseases of other endocrine glands	270-277	3,550	0.2	52,313	2.6	14.7	0.1	0.1
27. Avitaminoses and other metabolic diseases	280-289	8,887	0.4	138,565	6.9	15.6	0.3	0.4
IV. DISEASES OF THE BLOOD AND BLOOD-FORMING ORGANS								
28. Diseases of the blood and blood-forming organs	290-299	18,414	0.9	282,030	14.1	15.3	0.6	0.7
V. MENTAL, PSYCHONEUROTIC, AND PERSONALITY DISORDERS								
29. Psychoses	300-309	91,091	4.6	1,547,724	77.3	17.0	2.9	4.1
30. Psychoneurotic disorders	310-318	20,737	1.0	488,277	24.4	23.5	0.7	1.3
31. Disorders of character, behaviour, and intelligence	320-326	52,535	2.6	796,576	39.8	15.2	1.7	2.1
		17,819	0.9	262,871	13.1	14.8	0.6	0.7
VI. DISEASE OF THE NERVOUS SYSTEM AND SENSE ORGANS								
32. Vascular lesions affecting central nervous system	330-334	162,391	8.1	4,348,285	217.3	26.8	5.2	11.6
33. Inflammatory and other diseases of central nervous system	340-345, 350-357	37,699	1.9	1,925,786	96.2	51.1	1.2	5.1
		30,930	1.5	1,611,643	80.5	52.1	1.0	4.3

TABLE A 22 (Cont'd)

Canadian List Number and Diagnosis	I.S.C. No.	Separations		Patient-Days Since Admission		Average Length of Stay	Percentage Distribution	
		Total	Rate per 1,000 Population	Total	Rate per 1,000 Population		Separations	Patient-Days
VI. DISEASES OF THE NERVOUS SYSTEM AND SENSE ORGANS (Cont'd)								
	34. Diseases of nerves and peripheral ganglia	10,730	0.5	137,621	6.9	12.8	0.3	0.4
	35. Diseases and conditions of the eye	45,418	2.3	392,313	19.6	8.6	1.4	1.0
	36. Diseases of ear and mastoid process	37,614	1.9	280,922	14.0	7.5	1.2	0.7
VII. DISEASES OF THE CIRCULATORY SYSTEM		261,282	13.1	5,679,660	283.8	21.7	8.3	15.1
	37. Rheumatic fever and chronic rheumatic heart disease	11,458	0.6	234,587	11.7	20.5	0.4	0.6
	38. Arteriosclerotic and degenerative heart disease	111,602	5.6	2,797,849	139.8	25.1	3.6	7.4
	39. Other diseases of the heart	27,081	1.4	528,978	26.4	19.5	0.9	1.4
	40. Hypertensive heart disease and other hypertensive disease	25,923	1.3	537,760	26.9	20.7	0.8	1.4
	41. Diseases of arteries	17,638	0.9	841,699	42.1	47.7	0.6	2.2
	42. Varicose veins of lower extremities	22,993	1.1	277,878	13.9	12.1	0.7	0.7
	43. Haemorrhoids	20,849	1.0	190,571	9.5	9.1	0.7	0.5
	44. Phlebitis and thrombophlebitis	7,067	0.4	108,786	5.4	15.4	0.2	0.3
	*45. Other diseases of the circulatory system	16,671	0.8	161,552	8.1	9.7	0.5	0.4
		502,571	25.1	3,365,452	168.1	6.7	16.0	8.9
VIII. DISEASES OF THE RESPIRATORY SYSTEM		55,873	2.8	318,159	15.9	5.7	1.8	0.8
	47. Influenza	23,375	1.2	160,910	8.0	6.9	0.7	0.4

TABLE A 22 (Cont'd)

Canadian List Number and Diagnosis	I.S.C. No.	Separations		Patient-Days Since Admission		Average Length of Stay	Percentage Distribution	
		Total	Rate per 1,000 Population	Total	Rate per 1,000 Population		Separations	Patient-Days
VIII. DISEASES OF THE RESPIRATORY SYSTEM (Cont'd)								
48. Pneumonia	490-493	103,927	5.2	1,215,509	60.7	11.7	3.3	3.2
49. Bronchitis	500-502	65,310	3.3	686,609	34.3	10.5	2.1	1.8
50. Hypertrophy of tonsils and adenoids	510	200,802	10.0	437,437	21.9	2.2	6.4	1.2
*51. Other diseases of respiratory system	511-527	53,284	2.7	546,828	27.3	10.3	1.7	1.5
IX. DISEASES OF THE DIGESTIVE SYSTEM								
52. Diseases of teeth and supporting structure		424,531	21.2	4,375,844	218.6	10.3	13.6	11.6
53. Ulcer of stomach, duodenum, and jejunum	530-535	30,752	1.5	68,567	3.4	2.2	1.0	0.2
54. Gastritis, duodenitis and other disorders and diseases of the stomach and duodenum	540-542	45,716	2.3	669,050	33.4	14.6	1.5	1.8
55. Appendicitis	543-545	28,900	1.4	233,349	11.7	8.1	0.9	0.6
56. Hernia of abdominal cavity	550-553	48,974	2.4	380,729	19.0	7.8	1.6	1.0
57. Intestinal obstruction without mention of hernia	560-561	70,807	3.5	646,190	32.3	9.1	2.3	1.7
58. Gastroenteritis and colitis, except ulcerative, age 4 weeks and over	570	9,652	0.5	126,363	6.3	13.1	0.3	0.3
59. Chronic enteritis and ulcerative colitis	571	51,391	2.6	377,802	18.9	7.4	1.6	1.0
60. Cirrhosis and other diseases of liver	572	12,989	0.6	212,497	10.6	16.4	0.4	0.6
	580-583	7,955	0.4	173,427	8.7	21.8	0.3	0.5

TABLE A 22 (Cont'd)

Canadian List Number and Diagnosis	I.S.C. No.	Separations		Patient-Days Since Admission		Average Length of Stay	Percentage Distribution	
		Total	Rate per 1,000 Population	Total	Rate per 1,000 Population		Separations	Patient-Days
IX. DISEASES OF THE DIGESTIVE SYSTEM (Cont'd)								
61. Diseases of gallbladder and pancreas	584-587	80,450	4.0	1,118,515	55.9	13.9	2.6	3.0
*62. Other diseases of digestive system	536-539, 573-578	36,945	1.8	369,355	18.5	10.0	1.2	1.0
X. DISEASES OF THE GENITO-URINARY SYSTEM								
63. Nephritis and nephrosis	590-594	266,192	13.3	2,495,040	124.7	9.4	8.5	6.6
64. Infections of kidney	600	11,257	0.6	169,232	8.5	15.0	0.4	0.4
65. Calculi of kidney, ureter and other parts of urinary system	602,604	22,215	1.1	250,981	12.5	11.3	0.7	0.7
*66. Other diseases of urinary system	601,603,605-609	20,014	1.0	187,896	9.4	9.4	0.6	0.5
67. Hyperplasia of prostate	610	40,918	2.0	413,133	20.6	10.1	1.3	1.1
68. Redundant prepuce and phimosis	615	19,683	1.0	398,629	19.9	20.3	0.6	1.1
69. Diseases of ovary, Fallopian tube, and parametrium, and infective disease of uterus, vagina, and vulva	622-626, 630	10,369	0.5	34,367	1.7	3.3	0.3	0.1
70. Uterovaginal prolapse	631	35,638	1.8	258,430	12.9	7.3	1.1	0.7
71. Disorders of menstruation	634	22,236	1.1	317,989	15.9	14.3	0.7	0.8
*72. Other diseases of genital organs	611-614, 616, 617, 620, 621, 632, 633, 635-637	39,423	2.0	180,562	9.0	4.6	1.3	0.5
		44,439	2.2	283,821	14.2	6.4	1.4	0.8
XI. DELIVERIES AND COMPLICATIONS OF PREGNANCY, CHILDBIRTH AND THE PUERPERIUM								
73. Complications of pregnancy	640-649	517,113	25.8	2,979,531	148.9	5.8	16.5	7.9
74. Abortion	650-652	75,490	3.8	323,289	16.2	4.3	2.4	0.9
		45,823	2.3	173,458	8.7	3.8	1.5	0.5

TABLE A 22 (Cont'd)

Canadian List Number and Diagnosis	I.S.C. No.	Separations		Patient-Days since Admission		Average Length of Stay	Percentage Distribution	
		Total	Rate per 1,000 Population	Total	Rate per 1,000 Population		Separations	Patient-Days
XI. DELIVERIES AND COMPLICATIONS OF PREGNANCY, CHILDBIRTH AND THE PUERPERIUM (Cont'd)								
	660	342,813	17.1	2,013,478	100.6	5.9	10.9	5.3
	670-678	44,982	2.2	397,470	19.9	8.8	1.4	1.1
	680-689	8,005	0.4	71,836	3.6	9.0	0.3	0.2
75. Delivery without mention of complications (*)								
76. Delivery with specified complication (*)								
77. Complications of the puerperium								
XII. DISEASES OF THE SKIN AND CELLULAR TISSUE								
	690-698	58,742	2.9	584,759	29.2	10.0	1.9	1.6
		27,268	1.4	215,681	10.8	7.9	0.9	0.6
	700-716	31,474	1.6	369,078	18.4	11.7	1.0	1.0
78. Infection of skin and subcutaneous tissue								
*79. Other diseases of skin and subcutaneous tissue								
XIII. DISEASES OF BONES AND ORGANS OF MOVEMENT								
		112,735	5.6	2,108,900	105.4	18.7	3.6	5.6
	720-727	41,777	2.1	1,018,035	50.9	24.4	1.3	2.7
	735	21,072	1.1	350,604	17.5	16.6	0.7	0.9
*82. Other diseases of bones and organs of movement	730-734, 736-738, 740-749	49,886	2.5	740,261	37.0	14.8	1.6	2.0
XIV. CONGENITAL MALFORMATIONS								
	750-759	33,020	1.6	497,587	24.9	15.1	1.1	1.3
83. Congenital malformations								
XV. CERTAIN DISEASES OF EARLY INFANCY								
	760-776	9,919	0.5	136,257	6.8	13.7	0.3	0.4
84. Certain diseases of early infancy								

TABLE A 22 (Cont'd)

Canadian List Number and Diagnosis	I.S.C. No.	Separations		Patient-Days since Admission		Average Length of Stay	Percentage Distribution	
		Total	Rate per 1,000 Population	Total	Rate per 1,000 Population		Separations	Patient-Days
XVI. SYMPTOMS, SENILITY, AND ILL-DEFINED CONDITIONS								
*85. Symptoms, senility, and ill-defined conditions	780-795	80,118	4.0	596,392	29.8	7.4	2.6	1.6
XVII. ACCIDENTS, POISONINGS, AND VIOLENCE (NATURE OF INJURY)								
86. Fracture of or involving skull or face bones, and head injury, except open wound, contusion and haematoma of scalp	N800-N804, N852-N856	43,837	2.2	333,291	16.7	7.6	1.4	0.9
87. Fracture of spine and trunk	N805-N809	15,780	0.8	354,802	17.7	22.5	0.5	0.9
88. Fracture of upper limb	N810-N819	32,451	1.6	197,723	9.9	6.1	1.0	0.5
89. Fracture of femur	N820-N821	17,344	0.9	821,642	41.1	47.4	0.6	2.2
90. Other fracture of lower limbs (excluding femur)	N822-N829	24,836	1.2	362,873	18.1	14.6	0.8	1.0
91. Dislocation without fracture, and sprains and strains of joints and adjacent muscles	N830-N848	25,104	1.3	207,645	10.4	8.3	0.8	0.6
92. Internal injury of chest, abdomen, and pelvis	N860-N869	4,587	0.2	65,918	3.3	14.4	0.1	0.2
93. Burns	N940-N949	11,285	0.6	190,764	9.5	16.9	0.4	0.5
*94. Other and unspecified effects of accidents, poisonings, and violence	N850, N851, N870-N888, N890-N898, N900-N908, N910-N918, N920-N936, N950-N999	101,976	5.1	647,829	32.4	6.3	3.3	1.7

(¹) Data generally include all care given as insured benefits to persons other than newborn infants. For 1966, Nova Scotia excludes such care given outside its borders, as does British Columbia, while Saskatchewan excludes care given in its four geriatric hospitals. Newfoundland and Ontario include care given in their hospitals to persons who are not residents, Manitoba and Alberta include uninsured care provided in their hospitals to persons whom they insured, and Quebec includes all care given in its hospitals to anyone. Nova Scotia includes care given in the hospitals to sick newborn infants.

(²) Excludes "y" group supplementary classification for special admissions, and mature and immature newborn (95-98).

(³) These figures are estimated to offset a coding variation that occurred in Ontario.

* Residual or extremely heterogeneous, and hence excluded in the determination of the ranking in Table 21.

TABLE A 23

**FULL-TIME AND PART-TIME PERSONNEL IN HOSPITALS LISTED IN HOSPITAL INSURANCE AGREEMENTS, BY CATEGORY OF EMPLOYMENT
CANADA AND PROVINCES, 1966**

Category	Newfoundland		Prince Edward Island		Nova Scotia		New Brunswick		Quebec		Ontario		Manitoba	
	F.T.	P.T.	F.T.	P.T.	F.T.	P.T.	F.T.	P.T.	F.T.	P.T.	F.T.	P.T.	F.T.	P.T.
EMPLOYEES (except trainees)														
A. Medical	49	61	5	5	63	111	45	110	763	1,139	544	581	69	206
B. Nursing														
1. Graduate nurses	950	100	243	22	2,124	471	1,624	220	13,196	1,943	18,744	6,118	2,320	724
2. Qualified nursing assistants	468	4	105	3	676	77	739	37	5,191	342	6,688	1,003	914	199
3. Orderlies	174	—	27	1	155	3	309	1	3,358	213	2,970	253	543	22
4. Other	393	20	47	5	523	97	725	112	10,044	1,293	9,021	1,756	1,708	310
Total	1,985	124	422	31	3,478	648	3,397	370	31,789	3,791	37,423	9,130	5,485	1,255
C. Other professional and technical														
1. Hospital administrators	32	22	8	3	54	1	43	7	301	28	369	21	91	17
2. Dietitians	8	—	3	—	42	7	36	5	290	34	349	53	41	15
3. Medical record librarians	16	—	3	1	61	2	33	1	247	26	305	34	60	19
4. Laboratory technicians	134	6	11	—	195	17	50	—	1,818	233	2,063	237	236	36
5. Radiological technicians	73	—	12	1	188	2	91	—	957	59	990	93	88	13
6. Combined laboratory and radiological technicians	29	—	5	—	6	1	—	—	22	3	11	—	16	4
7. Physiotherapists	22	4	12	—	43	7	21	3	299	33	496	132	57	8
8. Occupational therapists	6	—	3	—	7	—	6	—	71	9	148	37	26	5
9. Pharmacists	17	—	3	2	27	6	25	3	236	72	282	70	46	15
10. Psychologists	1	1	—	—	2	2	3	—	58	34	40	30	4	4
11. Social workers	3	—	—	—	19	1	7	1	187	47	123	27	33	2
Total	341	33	60	7	644	46	315	20	4,486	578	5,176	734	698	138
D. Other personnel	1,923	13	376	39	3,048	239	2,681	108	26,747	2,058	28,350	4,890	3,750	650
TOTAL EMPLOYEES (except trainees)	4,298	231	863	82	7,233	1,044	6,438	608	63,785	7,566	71,493	15,335	10,002	2,249
TRAINEES														
A. Medical														
1. Residents and senior interns	23	2	—	—	101	—	94	—	1,512	101	844	8	170	14
2. Junior interns	34	—	1	—	59	2	11	—	545	82	334	1	74	6
Total	57	2	1	—	160	2	105	—	2,057	183	1,178	9	244	20
B. Nursing														
1. Student nurses	578	*	187	*	1,077	*	1,001	*	6,779	*	8,280	*	1,078	*
2. Nursing assistants	351	*	14	*	104	*	74	*	2,579	*	734	*	264	*
Total	929	*	201	*	1,181	*	1,075	*	9,358	*	9,014	*	1,342	*
C. Other professional and technical														
1. Medical record librarians	—	*	—	*	11	*	—	*	27	*	31	*	6	*
2. Laboratory technicians	20	*	—	*	43	*	2	*	116	*	425	*	130	*
3. Radiological technicians	18	*	6	*	59	*	31	*	299	*	416	*	74	*
Total	38	*	6	*	113	*	33	*	442	*	872	*	210	*
TOTAL TRAINEES	1,924	2	208	—	1,454	2	1,213	—	11,857	183	11,064	9	1,796	20
TOTAL PERSONNEL	5,822	233	1,071	82	8,687	1,046	7,651	608	75,642	7,749	82,557	15,344	11,798	2,269

TABLE A 23 (Cont'd)

Category	Saskatchewan		Alberta		British Columbia		Yukon		Northwest Territories		Canada	
	F.T.	P.T.	F.T.	P.T.	F.T.	P.T.	F.T.	P.T.	F.T.	P.T.	F.T.	P.T.
EMPLOYEES (except trainees)												
A. Medical	62	25	67	95	128	285	—	—	—	—	1,795	2,618
B. Nursing												
1. Graduate nurses	2,466	537	3,987	791	4,809	522	52	2	103	22	50,618	11,472
2. Qualified nursing assistants	801	72	2,073	159	1,432	138	24	—	47	2	19,158	2,036
3. Orderlies	307	7	638	26	834	14	2	—	1	—	9,338	540
4. Other	1,451	195	1,939	188	1,347	212	—	—	23	4	27,221	4,192
Total	5,025	811	8,637	1,164	8,442	886	78	2	174	28	106,335	18,240
C. Other professional and technical												
1. Hospital administrators	154	18	160	15	122	15	2	1	8	4	1,344	152
2. Dietitians	29	1	69	18	97	18	—	—	2	—	966	151
3. Medical record librarians	68	11	115	23	80	6	3	—	3	—	994	123
4. Laboratory technicians	291	15	339 ⁽¹⁾	23 ⁽¹⁾	490	38	3	—	5	—	5,635	605
5. Radiological technicians	125	1	153	13	198	26	2	—	3	1	2,880	209
6. Combined laboratory and radiological technicians	89	18	79	13	9	3	—	—	—	—	266	42
7. Physiotherapists	40	1	130	19	144	24	—	—	—	—	1,264	231
8. Occupational therapists	12	1	37	12	32	6	—	—	—	—	348	70
9. Pharmacists	48	15	58	19	56	22	1	—	1	1	800	225
10. Psychologists	4	2	5	3	3	2	—	—	—	—	120	78
11. Social workers	23	5	21	3	43	10	—	—	—	—	459	96
Total	883	88	1,166	161	1,274	170	11	1	22	6	15,076	1,982
D. Other personnel	3,810	480	6,090	668	6,293	1,012	69	6	166	35	83,303	10,198
TOTAL EMPLOYEES (except trainees)	9,780	1,404	15,960	2,088	16,137	2,353	158	9	362	69	206,509	33,038
TRAINEES												
A. Medical												
1. Residents and senior interns	85	—	162	—	215	—	—	—	—	—	3,206	125
2. Junior interns	44	—	61	—	79	—	—	—	—	—	1,242	91
Total	129	—	223	—	294	—	—	—	—	—	4,448	216
B. Nursing												
1. Student nurses	1,311	*	2,023	*	1,439	*	—	*	—	*	23,753	*
2. Nursing assistants	85	*	201	*	181	*	—	*	—	*	4,587	*
Total	1,396	*	2,224	*	1,620	*	—	*	—	*	28,340	*
C. Other professional and technical												
1. Medical record librarians	6	*	9	*	8	*	—	*	—	*	98	*
2. Laboratory technicians	137	*	135	*	95	*	—	*	—	*	1,103	*
3. Radiological technicians	63	*	94	*	86	*	—	*	—	*	1,146	*
Total	206	*	238	*	189	*	—	*	—	*	2,347	*
TOTAL TRAINEES	1,731	—	2,685	—	2,103	—	—	—	—	—	35,135	216
TOTAL PERSONNEL	11,511	1,404	18,645	2,088	18,240	2,353	158	9	362	69	241,644	33,254

(1) Includes 142 full-time and 3 part-time technicians employed by public health laboratories (Edmonton and Calgary)

PERSONNEL⁽¹⁾ IN HOSPITALS LISTED IN HOSPITAL INSURANCE AGREEMENTS, PERCENTAGE DISTRIBUTION BY CATEGORY OF EMPLOYMENT, CANADA AND PROVINCES, 1966

Category	Nfld.	P.E.I.	N.S.	N.B.	Que.	Ont.	Man.	Sask.	Alta.	B.C.	Yukon	N.W.T.	Canada
EMPLOYEES (except trainees)													
A. Medical	2.0	.9	1.8	1.9	2.3	1.1	2.0	.7	.8	2.0	—	—	1.6
B. Nursing	18.9	23.0	26.7	22.3	18.2	25.4	21.6	23.3	23.0	25.9	32.3	29.0	22.6
1. Graduate nurses	8.5	9.4	7.7	9.4	6.6	7.9	7.9	6.8	10.8	7.6	14.4	11.4	7.7
2. Qualified nursing assistants	3.1	2.4	1.6	3.8	4.3	3.3	4.0	2.4	3.2	4.2	1.2	.2	3.6
3. Orderlies	7.4	4.5	6.4	10.1	13.6	11.0	14.3	12.7	10.3	7.6	—	6.3	11.4
4. Other													
TOTAL	38.0	39.3	42.4	45.6	42.7	47.6	47.9	45.2	47.3	45.3	47.9	46.9	45.3
C. Other professional and technical													
1. Hospital administrators	1.0	1.0	.6	.6	.4	.4	.8	1.3	.8	.7	1.8	2.8	.5
2. Dietitians	.1	.3	.5	.5	.4	.4	.4	.2	.4	.6	—	.5	.4
3. Medical record librarians	.3	.3	.6	.4	.3	.3	.6	.6	.7	.4	1.8	.7	.4
4. Laboratory technicians	2.5	1.0	2.2	.6	2.5	2.3	1.9	2.4	1.9	2.6	1.8	1.2	2.3
5. Radiological technicians	1.3	1.1	2.0	1.1	1.2	1.1	.7	1.0	.8	1.1	1.2	.9	1.1
6. Combined laboratory and radiological technicians	.5	.4	.1	—	*	*	.1	.8	.4	.1	—	—	.1
7. Physiotherapists	.5	1.0	.5	.3	.4	.6	.5	.3	.7	.8	—	—	.5
8. Occupational therapists	.1	.3	.1	.1	.2	.2	.2	.1	.2	.2	—	—	.2
9. Pharmacists	.3	.4	.3	.3	.4	.4	.4	.5	.4	.4	.6	.5	.4
10. Psychologists	*	—	*	*	.1	.1	.1	*	*	*	—	—	.1
11. Social workers	.1	—	.2	.1	.3	.2	.2	.2	.1	.3	—	—	.2
Total	6.7	5.8	7.1	4.1	6.1	6.0	5.9	7.5	6.4	7.0	7.2	6.5	6.2
D. Other personnel	34.9	36.0	33.8	33.8	34.5	34.0	31.3	33.2	32.6	35.5	44.9	46.6	34.0
TOTAL EMPLOYEES (except trainees)	81.5	82.0	85.0	85.3	85.6	88.7	87.1	86.6	87.0	89.8	100.0	100.0	87.1
TRAINEES													
A. Medical	.5	—	1.0	1.1	1.9	.9	1.3	.7	.8	1.0	—	—	1.2
1. Residents and senior interns	.6	.1	.6	.1	.8	.3	.6	.3	.3	.4	—	—	.5
2. Junior interns													
Total	1.1	.1	1.7	1.3	2.7	1.2	1.9	1.0	1.1	1.4	—	—	1.7
B. Nursing	10.4	16.2	11.1	12.1	8.1	8.5	7.7	10.2	9.8	7.0	—	—	8.6
1. Student nurses	6.3	1.2	1.1	.9	3.1	.7	1.9	.7	1.0	.9	—	—	1.7
2. Nursing assistants													
Total	16.7	17.4	12.1	13.0	11.2	9.2	9.5	10.8	10.7	7.9	—	—	10.3
C. Other professional and technical													
1. Medical record librarians	—	—	.1	—	*	*	*	*	*	*	—	—	*
2. Laboratory technicians	.4	—	.4	*	.1	.4	.9	1.1	.7	.5	—	—	.4
3. Radiological technicians	.3	.5	.6	.4	.4	.4	.5	.5	.5	.4	—	—	.4
Total	.7	.5	1.2	.4	.5	.9	1.5	1.6	1.1	.9	—	—	.9
TOTAL TRAINEES	18.5	18.0	15.0	14.7	14.4	11.3	12.9	13.4	13.0	10.2	—	—	12.9
TOTAL PERSONNEL	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0

* Less than 0.05%

⁽¹⁾ Part-time employees counted as full-time.

Source: Table A 23

TABLE A 25

PERSONNEL⁽¹⁾ IN HOSPITALS LISTED IN HOSPITAL INSURANCE AGREEMENTS BY CATEGORY OF EMPLOYMENT, RATES
PER 100,000 POPULATION, CANADA AND PROVINCES, 1966.

Category	Nfld.	P.E.I.	N.S.	N.B.	Que.	Ont.	Man.	Sask.	Alta.	B.C.	Yukon	N.W.T.	Canada
EMPLOYEES (Except Trainees)													
A. Medical	16.2	7.4	15.7	16.2	23.1	12.0	17.9	7.9	7.9	14.5	—	—	15.5
B. Nursing	202.7	234.0	312.2	281.1	245.1	313.2	278.5	286.3	299.5	270.6	368.5	396.7	281.6
1. Graduate nurses	95.3	98.6	94.6	122.9	92.8	103.3	105.3	87.6	147.1	80.1	166.9	167.0	100.8
2. Qualified nursing assistants	38.3	25.8	20.8	50.3	59.9	44.5	57.5	32.6	44.5	45.4	13.9	3.5	48.0
3. Orderlies	81.7	46.1	75.7	126.6	184.9	142.2	193.4	162.1	138.9	77.5	—	87.0	146.5
4. Other													
C. Other professional and technical	414.9	403.6	502.9	580.8	582.7	603.2	634.7	568.5	630.1	474.2	549.3	654.2	576.8
1. Hospital administrators	8.7	9.2	7.3	7.6	5.4	5.5	10.4	17.1	11.5	6.9	20.9	34.8	7.1
2. Dietitians	1.6	2.8	6.1	6.3	5.3	5.4	5.1	3.1	5.3	5.7	—	7.0	5.2
3. Medical record librarians	3.2	3.7	8.2	5.5	4.5	4.6	7.3	7.7	8.7	4.4	20.9	10.4	5.3
4. Laboratory technicians	27.8	10.1	27.0	8.1	33.5	31.3	26.4	31.3	24.0	27.2	20.9	17.4	29.7
5. Radiological technicians	15.0	12.0	25.0	14.8	17.1	14.9	9.9	13.2	10.9	11.3	13.9	13.9	14.9
6. Combined laboratory and radiological technicians	5.9	4.6	.9	—	.4	.2	1.9	10.3	5.9	.6	—	—	1.4
7. Physiotherapists	4.9	11.1	6.2	3.7	5.5	8.1	6.3	4.3	9.6	8.3	—	—	6.9
8. Occupational therapists	1.2	2.8	.9	1.0	1.3	2.4	3.0	1.4	2.9	1.9	—	—	1.9
9. Pharmacists	3.4	3.7	3.9	4.4	4.7	4.6	5.6	5.9	4.6	3.6	7.0	7.0	4.6
10. Psychologists	.4	—	.4	.5	1.3	.8	.6	.5	.5	.2	—	—	.8
11. Social workers	.6	—	2.6	1.3	3.6	2.0	3.5	2.7	1.6	2.6	—	—	2.5
Total	72.6	59.0	88.2	52.7	82.6	79.6	79.6	97.0	85.2	72.5	83.4	87.0	80.3
D. Other personnel	391.2	364.9	419.0	443.4	480.5	442.4	423.1	423.9	439.0	362.9	500.6	640.3	441.7
TOTAL EMPLOYEES (Except Trainees)	894.6	832.9	1,025.7	1,093.1	1,168.8	1,137.2	1,155.4	1,097.2	1,162.1	924.1	1,133.4	1,381.4	1,114.3
TRAINEES													
A. Medical	4.9	—	13.4	15.2	27.0	12.2	18.4	8.9	11.1	11.5	—	—	16.3
1. Residents and senior interns	6.9	.9	7.9	1.8	10.1	4.8	8.0	4.6	4.2	4.2	—	—	6.4
2. Junior interns													
Total	11.8	.9	21.3	17.0	37.2	17.0	26.4	13.5	15.2	15.7	—	—	22.8
B. Nursing	117.1	172.3	142.5	162.3	117.3	119.0	111.9	137.2	138.3	76.8	—	—	118.7
1. Student nurses	71.1	12.9	13.8	12.0	44.6	10.5	27.4	8.9	13.7	9.7	—	—	22.9
2. Nursing assistants													
Total	188.3	185.2	156.2	174.3	161.9	129.5	139.3	146.1	152.0	86.5	—	—	141.6
C. Other professional and technical	—	—	1.5	—	.5	.4	.6	.6	.6	.4	—	—	.5
1. Medical record librarians	4.1	—	5.7	.3	2.0	6.1	13.5	14.3	9.2	5.1	—	—	5.5
2. Laboratory technicians	3.6	5.5	7.8	5.0	5.2	6.0	7.7	6.6	6.4	4.6	—	—	5.7
3. Radiological technicians													
Total	7.7	5.5	14.9	5.4	7.6	12.5	21.8	21.5	16.3	10.1	—	—	11.7
TOTAL TRAINEES	207.7	191.6	192.5	196.7	206.7	159.0	187.5	181.2	183.5	112.2	—	—	176.1
TOTAL PERSONNEL	1,102.4	1,024.6	1,218.2	1,289.7	1,375.5	1,296.2	1,342.9	1,278.4	1,345.6	1,036.3	1,133.4	1,381.4	1,290.4

(1) Two part-time employees counted as one full-time.

Source: Table A 22.

TABLE A26

PAID HOURS OF WORK OF NURSING AND OTHER PERSONNEL, PATIENT-DAYS AND RATIOS OF HOURS TO PATIENT-DAYS IN BUDGET REVIEW GENERAL HOSPITALS, CANADA AND PROVINCES, 1966

PROVINCE	Number			Hours per Patient-Day			Patient Days During Year
	Total	Nursing Personnel	Other Personnel	Total	Nursing Personnel	Other Personnel	
Newfoundland	7,060,656	3,838,515	3,222,141	14.21	7.72	6.48	497,016
Prince Edward Island	2,178,767	1,255,183	923,584	12.32	7.10	5.22	176,808
Nova Scotia	16,556,441	9,091,719	7,464,722	14.19	7.79	6.40	1,167,029
New Brunswick	14,810,750	8,799,217	6,011,533	14.09	8.37	5.72	1,051,143
Quebec	123,759,526	64,726,459	59,033,067	17.13	8.96	8.17	7,225,160
Ontario	156,030,493	87,873,655	68,156,838	14.08	7.93	6.15	11,081,148
Manitoba	21,018,156	12,396,884	8,621,272	14.23	8.39	5.83	1,477,535
Saskatchewan	23,927,614	13,161,937	10,765,677	12.16	6.69	5.47	1,967,463
Alberta	32,220,459	18,676,562	13,543,897	13.21	7.66	5.55	2,439,551
British Columbia	34,912,425	19,526,265	15,386,160	11.89	6.65	5.24	2,936,844
Yukon	24,769	10,385	14,384	12.35	5.18	7.17	2,005
Northwest Territories	153,117	70,100	83,017	10.64	4.87	5.77	14,389
CANADA	432,653,173	239,426,881	193,226,292	14.40	7.97	6.43	30,036,091

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